

Facilitating patient self management through telephony and web technologies in seasonal influenza. Informatics in Primary Care 2010; v18 n1 pp 9-16.

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Abstract

Purpose The aim of this project was to develop and test information technology implementations that could assist patients with influenza self-management in primary care settings. Although testing was conducted in the context of seasonal influenza, the project aimed to develop a blueprint that primary care practices could use in an influenza pandemic. **Methods** Four primary care practice-based research networks (PBRNs) systematically designed, implemented, tailored and tested a tiered patient self-management technology model in 12 primary care practices during the peak of the 2007 to 2008 influenza season. Participating clinicians received a customised practice website that included a bilingual influenza self-triage module, a downloadable influenza toolkit and electronic messaging capability. As an alternative option, a bilingual, interactive seasonal influenza telephone hotline that patients could call for assistance was provided. **Results** Influenza self-management web pages presented via nine customised practice websites received 1060 hits between February and April of 2008. The Self-management Influenza Toolkit was downloaded 76 times and 185 Influenza Self-Triage Module sessions were completed via practice websites during the course of testing. Logs of the telephony hotline indicated 88 calls between February and April 2008. Seventy-two percent of callers had influenza-like symptoms and 18% were eligible for antiviral therapy. The Spanish language option was selected by 21% of callers. Qualitative feedback from 37 patients (29 English and 8 Spanish) and six clinicians from four PBRNs indicated ease of use, problem-free access and navigation, useful and adequate information that was utilised in various ways by patients and a high level of overall satisfaction with these technologies. Both patients and clinicians provided rich and meaningful feedback about future improvements. **Conclusions** Primary care patients and their clinicians can adopt and successfully utilise influenza self-management technologies. Our pilot study suggests that web resources combined with telephony technology are feasible to set up and easy to use in primary care settings.