SUPPLEMENTARY MATERIAL

1. The patient’s preferences: teleconsultation or on-site visit

Figure 1 shows the algorithm for a telematic visit to a patient with asthma and it details which health professionals could participate in each of its phases.

Before considering the visit, it is necessary to check if this telematic visit can be carried out properly. In this case, patient must meet a series of criteria: have a telephone or internet connection, not have a disability that prevents them from using these systems and, above all, want to use them.

It is important to bear in mind that the patient’s consent to carry out a telematic visit occurs at the same time that they wish to carry it out, and this must be reflected in their clinical history.

2. Delphi methodology

A Delphi-like questionnaire was designed to analyse the level of agreement about several items related to the COMETA algorithm for teleconsultation. The Delphi method is carried out by performing successive surveys and the compilation of feedback at each of them, in order to ease the revision of the responses of the panel1.

The items of the questionnaire were formulated and validated by an expert scientific committee with this purpose. The questionnaire included 55 items about (a) general perception of the teleconsultation algorithm; (b) preparation of teleconsultation according to the algorithm; (c) teleconsultation according to the algorithm; (d) closing of teleconsultation according to the algorithm. The questionnaire was programmed and distributed as an internet-based survey.

In this specific case, consultation was performed in a first wave was carried out from July to September of 2021; and in a second wave, from October to November of 2021.

A pre-selected multidisciplinary panel composed by 75 experts in pulmonology, allergology, family medicine, nursing and community pharmacy participated in the survey, with a percentage of participation of 100% in both waves.

A Likert scale of 9 values (1 = the lowest agreement, and 9 = the highest agreement) was used to express the agreement with each item. For interpretative purposes, 1-3 was considered lack of agreement; 4-6, neutral; and 7-9, agreement. Results are shown as the percentage of participants in agreement with the item. Consensus was considered when 70% of participants or more expressed the same answer. A descriptive statistical analysis was performed for all variables and categorical variables were described by number of cases and percentage.

Reference