MATERIAL SUPPLEMENTARY

Table. Level of consensus of the evaluated items.

Procedure	Item	% of participants in agreement
A. General perception of teleconsultation algorithm		
Content	1. All health professionals involved are included	84%
	2. All aspects to consider on a teleconsultation are included	73%
	3. All steps of teleconsultation are included	71%
	4. All the possible options for the correct action during a teleconsultation are included	68%
Utility	5. It is useful for preparing teleconsultations	77%
	6. It is useful for carrying out teleconsultations	77%
	7. It is useful in clinical practice for monitoring patients with asthma	79%
	8. It is useful for nurses	79%
	9. It is useful for family medicine physicians	77%
	10. It is useful for physicians other than family medicine	71%
	11. It is useful for pharmacists	71%
B. Preparation of teleconsultation according to the algorithm		
Automation	12. It should be automatized through a management system	97%
Notification and reminder of the connection	13. SMS for notifying and reminding the patient the connection through a reliable platform	93%
	14. Email for notifying and reminding the patient the connection through a reliable platform	79%
	15. Specific app for notifying and connecting to the teleconsultation	92%
	16. Send ACT together with the notification	89%
	17. Send TAI-10 together with the notification	88%
Resources for the patient	18. Ensure patients have their action plan on hand	97%
	19. Ensure patients have their inhalers on hand	95%
	20. Ensure patients have a peak flow meter and registration of values on hand	88%
Review of medical records	21. Physicians review medical records	95%
	22. Nurses review medical records	89%
	23. Pharmacists review medical records	44%
Review of collection of medication	24. Physicians review electronic pharmacy refill records	89%
	25. Nurses review electronic pharmacy refill records	84%
	26. Pharmacists review electronic pharmacy refill records	83%

C. Teleconsultation according to the algorithm

Items to assess during teleconsultation	27. Treatment adherence	100%
	28. Existence of comorbidities	99%
	29. Inhalation technique	99%
	30. Trigger and aggravating factors	89%
	31. Control of symptoms	80%
Assessment of adherence	32. Review electronic pharmacy refill records	97%
	33.	
	34. Review patient-reported TAI-10	93%
Assessment of comorbidities	35. Identify comorbidities that can contribute to poor asthma control or increase the risk of exacerbation	96%
Assessment of inhalation technique	36. Refer the patient to the nurse to check the technique in person	93%
	37. Refer the patient to the community pharmacist to check the technique in presential visit	61%
	38. Have a camera to see the patient performing the technique	92%
	39. Have a video of the patient performing the technique	79%
	40. Offer tutorial videos of the inhalation technique	93%
Assessment of trigger and aggravating factors	41. Remind how to avoid trigger and aggravating factors	99%
	42. Identify trigger and aggravating factors for symptoms and/or exacerbation	99%
	43. Review self-care counselling for asthma	99%
Assessment of asthma control	44. Inquire about the use of rescue medication	100%
	45. Inquire about the use of oral corticosteroids since the last visit	100%
	46. Inquire about the number of exacerbations since the last visit	100%
	47. Inquire about the presence of night and/or day symptoms	99%
	48. Review patient-reported ACT	97%
	49. Review peak flow records	85%

D. Closing of teleconsultation according to the algorithm

Adjustments	50. Review and adjust treatment to the situation of the patient	100%
	51. Review and adjust action plan together with the patient	100%
Schedule of following visits	52. Schedule next visit	97%
	53. Schedule an in-person visit if poor control	96%
	54. Schedule another teleconsultation if good control and no need for treatment adjustment	95%
	55. Consider an upcoming visit with pharmacist if good control	97%
	56. Consider an upcoming visit with nurse if good control	80%

ACT, Asthma Control Test; SMS, Short Message Service; TAI-10, 10-item Test of Adherence to Inhalers.
Colour legend: No consensus ≤70%; Consensus ≥70%