Comparition between indication for referrals of the teleconsultant and the family health doctor: the Betim, Minas Gerais case

Telehealth of Betim; Director of labor management and health management – DGTES, HEALTH-DGTES, Municipal Health Secretary - SMS, Betim municipal mayor - MG, Betim, Minas Gerais, Brazil (MA Trento) Contact: telessaudebetim@gmail.com; (31) 3512.3413; Pará de Minas; 640; Brasiléia; Betim; Zip code: 32.600.412; Minas Gerais, Brasil.

Introduction: The article compares the behavior indicated by teleconsultants about keeping the patient in the unit with the vision of the family health doctor after teleconsulting in the city of Betim, Minas Gerais, in a context in which physicians are satisfied with teleconsulting. Method: A cross-sectional study with a descriptive and analytical approach of 1157 teleconsultations carried out by family health doctors from May 2017 to May 2018. Results: PSF physicians are satisfied with teleconsultant in general, 73.9% of teleconsultants carried out, the teleconsultants suggest that the patients stay in the unit itself with variation among the specialties. As for the conduct of family health doctors, 44% intend to keep the patient in the unit after the teleconsultants have a good evaluation by the family health physicians, however, there are disagreements regarding the maintenance of the patient in the unit or not, indicating a difficult situation in the process of incorporating telehealth in the realities of care.

Keywords: Telemedicine; Evaluation of Health Services; Teleconsulting; Family Health Teams.

Comparación entre la indicación para encaminamientos del teleconsultor y del médico de salud de la familia: el caso de Betim, Minas Gerais.

Introducción: El artículo compara la conducta indicada por los teleconsultores sobre mantener al paciente en la unidad con la visión del médico de salud de la familia, después de la realización de teleconsultorias, en el municipio de Betim, Minas Gerais, en un contexto en el cual los médicos están satisfechos con la realización de teleconsultorias. Método: Estudio transversal, con abordaje descriptivo y analítico de 1157 teleconsultorias realizadas por médicos de salud de la familia, en el período de mayo de 2017 a mayo de 2018. Resultados: Los médicos del PSF están satisfechos con las respuestas de las teleconsultorias, con 94,5 % se sitúan entre satisfechos y muy satisfechos. En cuanto a la conducta sugerida por el teleconsultor en general, el 73,9% de las teleconsultorias realizadas, los teleconsultores sugieren que los pacientes queden en la propia unidad con variación entre las especialidades. En cuanto a la conducta de la familia, el 44% pretenden mantener al paciente en la unidad después de la realización de las teleconsultorias también con variación entre las diversas especialidades. Otros parámetros también se analizaron. Conclusión: Las teleconsultorias poseen una buena evaluación por parte de los médicos de salud de la familia entretanto hay divergencias en cuanto al mantenimiento del paciente en la unidad o no, apuntando una situación de dificultad en el proceso de incorporación de telesalud en las realidades asistenciales.

Palabras-clave: Telemedicina; Evaluación de Servicios de Salud; Teleconsultorias; Equipos de Salud de la Familia.

UMI ISU

Comparação entre indicação para encaminhamentos do teleconsultor e do médico de saúde da família: o caso de Betim, Minas Gerais.

Introdução: O artigo compara a conduta indicada pelos teleconsultores sobre manter o paciente na unidade com a visão do médico de saúde da família, após a realização de teleconsultorias, no município de Betim, Minas Gerais, em um contexto no qual os médicos estão satisfeitos com a realização de teleconsultorias Método: Estudo transversal, com abordagem descritiva e analítica de 1157 teleconsultorias realizadas por médicos de saúde da família, no período de maio de 2017 a maio de 2018. Resultados: Os médicos do PSF estão satisfeitos com as respostas das teleconsultorias, com 94,5% se situando entre satisfeitos e muito satisfeitos. Quanto à conduta sugerida pelo teleconsultor em geral, em 73,9% das teleconsultorias realizadas, os teleconsultores sugerem que os pacientes fiquem na própria unidade com variação entre as especialidades. Quanto à conduta dos médicos de saúde da família, 44% pretendem manter o paciente na unidade após a realização das teleconsultorias também com variação entre as diversas especialidades. Outros parâmetros também foram analisados. Conclusão: As teleconsultorias possuem uma boa avaliação por parte dos médicos de saúde da família, entretanto há divergências quanto a manutenção do paciente na unidade ou não, apontando mais uma situação de dificuldade no processo de incorporação de telessaúde nas realidades assistenciais. **Palavras-chave:** Telemedicina; Avaliação de Serviços de Saúde; Teleconsultorias; Equipes de Saúde da Família.

Introduction

Telehealth's situation around the world is advancing. A OMS¹ study encompassing 70 countries, in 2016, demonstrates the uneven pathway of its development: while in the world 57% of the countries already had a national policy or reference in telehealth, in America this was limited to 36,8%; as for the implementation of teleradiology programs, in the world and in America 754% and 10,5% respectively; telepathology programs, remote monitoring and teledermatology, 50% and 10,5%, respectively; in relation to the evaluation of telehealth actions, the situation is precarious in both situations: 25% and 2%. As for the factors that hinder its implementation, are quoted: absence of ICT infrastructure, funding and regulations; competition between the priorities in the health field and proofs that telehealth work.

In Brazil, however, there is a significantly more expressive use of telehealth resources in the Brazilian public network. A study² carried out from the data of the Programa de Melhoria do Accesso e Qualidade (free translation: Improvement of the Access and Quality Program), that applied interviews with 92,5% of the Family Health Teams (ESF) in 2014, notes that 32,7% of these used telehealth resources in a global context in which only 51,1% of the country's health units had internet access. From the proposal of the national program to implement telehealth resources in about 14.450 ESF in the country, more than 9000 teams exist, with telehealth structure and most importantly using these resources already demonstrates the gradual process of the implementation of telehealth projects in Brazil. This process is uneven in the country, with the north and northeast regions using it less: however, the smaller municipalities, with less than 10.000 inhabitants and with worse socioeconomic conditions have an average of 42,3% of use while the national average is 32.7%:

The initial proposal of a project of implementation of telehealth resources involving educational activities and of carrying out teleconsulting and telediagnosis in public area is in full expansion. In an article³ published in 2016, it was observed that the telehealth program in the Brazilian public network was present in 23 states and, with a total of 8.097 points, assisted 3.417 municipalities. Each state has specificities. The author emphasizes that Minas Gerais attributed emphasis in the implementation of the service of electrocardiogram from afar, due to the importance of cardiovascular diseases in the state's epidemiological profile. In Rio de Janeiro, teleradiology allows common chest radiological exams carried out in primary care services to be digitalized and sent to the evaluation of teleconsultants radiologists. In Rio Grande do Sul telediagnosis for chronic respiratory diseases are carried out with obstetric ultrasonography with the use of telemedicine. Santa Catarina develops a wide exam transmission network, among which are ECG, computed tomography, ultrasound and magnetic resonance. Exams obtained in hospitals from the state interior are rendered by specialist

in collaborator centers. São Paulo, in turn, has stand out in teleeducation, with initiatives such as the Projeto Homem Virtual (free translate: Virtual Man Project), the Projeto Jovem Doutor (free translation: Young Doctor Project), the Projeto Cybertutor (free translation: Cybertutor Project), the Projeto Sala de Aula Interativa do Futuro (free translation: Futuristic Interactive Classroom Project), among others.

In a 2017⁴ article, produced by the national coordination of the telehealth project, focusing specifically the national project, it is observed that the project was implemented in 47 telehealth centers, from which 25 were intermunicipal and 22 were state centers. Among these, 46 offered the teleconsulting service, while 15 offered SOF's activity, only 11 offered telediagnosis service and 24 centers offered teleeducation activity. More so, it is noted that 08 centers are in implementation phase. According to this study, in the period of a year – February 2016 until march 2017 – 79.112 teleconsultings were carried out, and the centers that carried out the most teleconsultings were Minas Gerais with 25.604, Santa Catarina with 14.373, Paraná with 12.580, Maranhão with 6.565 and Pernambuco with 3.050.

As for the telediagnosis in the same period 725.037 telediagnosis were carried out. Minas Gerais with 472.703 diagnoses, Santa Catarina with 209.423, Ceará with 2.079, Rio Grande do Sul with 7.048 diagnoses, Pernambuco with 5.760, Goiás with 5.608, Mato Grosso with 3.179 and Espírito Santo with 525. As for the teleeducation activities, in the analyzed period, more than 27.372 participation in teleeducation activities happened.

Many studies^{5,6,7,8,9,10} confirm the power of the national project in many areas. In medicine, the areas of cardiology, ophthalmology, dermatology are the ones that stand out the most. The nursing¹¹ area participates in an active way in the national project with studies determining important modification in its work process. The phonoaudiology^{12,13} physiotherapy¹⁴ executes activities in many places. The odontology area already uses this tool for teleeducation a lot and tries to advance with other strategies^{15,16}.

Many studies involving teleconsultancies carried out in the country are being developed. A comparative study¹⁷ between the quality of the teleconsultings carried out by the family health teleconsultants and specialist teleconsultants showed that there are no significant differences between the two acting forms, with professionals presenting similar levels of satisfaction.

A study in Rio Grande do Sul¹⁸ emphasized that over 50.000 clinical consultations were carried out. More than 15.000 health professional benefited from the teleconsultations and telediagnosis and teleeducation activities. The study shows that, even with the presence of structural limitations, telemedicine is potentially useful to better the quality of service and to expedite the flow between the different levels of service. A study from the State of Pernambuco¹⁹ concluded that telehealth can contribute with the improvement of integral care to the assisted population's health, however it needs to overcome the problems of adhesion to the intervention, especially when it comes to Teleassistance.

A study from Bahia²⁰, involving teleconsultings and educational activities, concluded that the result is the expansion of professional actions and the access to specialties in more remote locations.

In the face of this scenario of the expansion of the national telehealth project, it is still necessary to carry out studies to comprehend the distinct benefits and the concrete reality that this program presents in the day to day SUS reality.

In the sense of deepening of some aspects related to the teleconsultings, the strategic component of the national telehealth project in Brazil, this article intends, in a context in which the doctors are satisfied with the completion of teleconsultancies, to compare the conduct indicated by the teleconsultants about maintaining the patient in the unit with the vision of the family health doctor, after the accomplishment of teleconsultancies, in the municipality of Belém, Minas Gerais,

Betim was chosen for this analysis for the fact that most of the teleconsultings were carried out by doctors that, in a continuous way, have held out teleconsultings through time, allowing an evaluation in context were doctors make regular use of the resource, knowing its limits and potentialities.

Method

It is a cross-sectional study, with a descriptive and analytical approach. The researched universe refers to the 1157 teleconsultings carried out by the family health doctors from the municipality of Belém, Minas Gerais, in the period of may 2017 to may 2018. These teleconsultings are carried out in a system specially developed for this end, that presents in its scope a group of variables that allow for the identification of the expertise of the teleconsultant, conduct suggested by the teleconsultant just as the referral of the case pretended by the applicant, such as to refer or not the patient to a specialized consultation and measurement of the satisfaction of the applicants. These last two variables are filled after carrying out the teleconsulting.

Initially, a descriptive study was carried out regarding the satisfaction of the costumer to the teleconsultings, classifying them as very happy, happy, indifferent, unhappy and very unhappy. After that, the level of satisfaction was distributed by the different specialties.

A distribution of the teleconsultings by expertise was carried out depending on the conduct proposed by the teleconsultant just as by the referring or not the patient in the vision of the family health doctor. Afterwards, an analysis of variance to observe if in the specialties with the biggest requests occur significant differences regarding the global average of referrals to other levels of complexity in the vision of the teleconsultants and the family health doctors.

Results

The PSF doctors are satisfied with the answer of the teleconsultings, with 94,5% falling between happy and very happy, as observed in table 1 below.

Table 1 -	Distribution	of the	teleconsultings	in	terms	of	level
of satisfac	ction						

Level of satis- faction regard- ing the telecon- sultings	Absolute Number	%
Indifferent	28	4,0
Unhappy	8	1,1
Very unhappy	3	0,4
Нарру	195	27,9
Very Happy	467	66,6
Subtotal	701	100,0
Didn't Answer	456	39,4
Total	1157	100,0

It can be observed on table 2 that the solicited specialties that have the biggest number of teleconsultings are: dermatology, orthopedics and traumatology, cardiology, neurology, endocrinology, medical clinic and rheumatology. As for the user satisfaction, all in all, there is a big prevalence between "happy" and "very happy" in all specialties. Among the specialties in which the very happy are above 70% there is medical clinic- 78%, cardiology – 76%, endocrinology – 79%. The ones who have the biggest percentage of happy are: dermatology 60%, neurology 63%, orthopedics 49% and rheumatology 56%.

 Table 2 - Distribution of the teleconsultings regarding the level of satisfaction by specialty – Betim

Caracialty	Very	11 0/	Unhap-	Very	Indifferent	Tetel
Speciality	Happy %	нарру %	ру %	unhappy %	%	Iotai
Angiology	70%	20%	10%	0%	0%	10
Cardiology	76%	24%	0%	0%	0%	74
General	670/	220/	0%	09/	09/	c
Surgery	07 70	3370	076	076	0%	0
Pediatric	0%	0%	0%	0%	0%	1
Surgery	078	070	078	078	076	1
Vascular	50%	50%	0%	0%	100%	2
Surgery	5078	5078	078	078	10078	2
Medical Clinic	78%	22%	0%	0%	0%	37
Dengue,						
Chikungunya	0%	100%	0%	0%	0%	1
and Dengue						
Dermatology	60%	32%	2%	0%	7%	162

Endocrinology						
and Metab- olism	79%	21%	0%	0%	0%	33
Pediatric						
Endocrinology	67%	0%	33%	0%	0%	3
Nursing						
Woundo	25%	50%	0%	0%	25%	4
Wounds						
Gastroenter-	91%	9%	0%	0%	0%	23
ology						
Gastroenter-						
ology/hepa-	73%	27%	0%	0%	0%	0
tology						
Pediatric						
Gastroenter-			0%	0%	0%	0
ology						
Geriatrics	56%	33%	0%	11%	0%	9
Gynecology	48%	24%	0%	0%	29%	21
Gynecology	89%	11%	0%	0%	0%	18
and Obstetrics						
Gynecology/						
Human	100%	0%	0%	0%	0%	1
Reproduction						
Hematology	59%	41%	0%	0%	0%	17
Hematology						
– Pediatric	100%	0%	0%	0%	0%	1
Hemotherapy						
Infectiology	91%	9%	0%	0%	0%	11
Infectiology/						
Dengue,						
Chikungy-						
nya, Zika,	0%	0%	0%	100%	0%	1
Microcephaly						
and Aedes						
Aegypti						
Mastology	50%	50%	0%	0%	0%	2
Family	0%	100%	0%	0%	0%	1
Nephrology	65%	35%	0%	0%	0%	1
Pediatric						
Nephrology	50%	50%	0%	0%	0%	2
Neurology	63%	27%	2%	0%	7%	41
Pediatric						
Neurology	57%	43%	0%	0%	0%	7
Pediatric						
Dentistry	100%	0%	0%	0%	0%	1
Ophthalmol-						
ogy	86%	14%	0%	0%	0%	7
Oncology						
	100%	0%	0%	0%	0%	1
Orthopedics						
and Trauma-						
tology	49%	44%	4%	0%	2%	45

Otolaryn-	50%	50%	0%	0%	0%	14
gology	0070	0070	070	070	070	14
Pediatric Oto-	1009/	09/	0%	09/	09/	e
laryngology	100%	076	076	076	0.76	0
Pediatrics	74%	21%	0%	0%	5%	19
Pneumology	91%	9%	0%	0%	0%	11
Pediatric	220/	990/	0%	09/	220/	0
Pneumology	33%	33%	0%	0%	33%	3
Psychiatry	61%	36%	0%	0%	4%	28
Conventional						
Radiology and						
Computed	0%	100%	0%	0%	0%	1
Tomography						
Rheumatology	56%	37%	0%	4%	4%	27
Urology						
Subtotal						
100% 702	78%	17%	0%	0%	4%	23
Didn't Answer	454					
Total	1157					

As for the conduct suggested by the teleconsultant by specialty, is can be observed by table 3, that in 73,9% of the carried out teleconsultings, the teleconsultants suggest that the patients stay in the unit itself. There are specialties in which many teleconsultings are carried out and in which these rates exceed 80%: hematology (82,8%), medical clinic (80,8%), psychiatry (80,0%), dermatology (80,3%) and gynecology (90,3%). However, there are other specialties with bigger number of teleconsultings where these rates are low: ophthalmology and gastroenterology.

Table 3 - Distribution of the teleconsultings regarding theconduct suggested by the teleconsultant by specialty, Betim,may 2017 and may 2018

Specialties	Keep the	Refer-	Total of	%
	Unit	rals	Solicita-	Keep
			tions	in Unit
Angiology	10	8	18	55,6%
Cardiology	86	23	109	78,9%
General Surgery	4	6	10	40,0%
Pediatric Surgery	0	1	1	0,0%
Vascular Surgery	1	1	2	50,0%
Medical Clinic	42	10	52	80,8%
Dengue, Chikungunya	0	1	1	0,0%
and Dengue				
Dermatology	228	56	284	80,3%
Endocrinology and	39	14	53	73,6%
Metabolism				
Pediatric Endocri-	1	2	3	33,3%
nology				
Nursing	4	0	4	100,0%
Wound Treatment				

Gastroenterology	22	16	38	57,9%
Gastroenterology/	9	8	17	52,9%
Pediatric Gastroen-	1	0	1	100,0%
terology				
Geriatrics	11	1	12	91,7%
Gynecology	28	З	31	90,3%
Gynecology and Obstetrics	21	5	27	77,8%
Gynecology/Human Reproduction	1	0	1	100,0%
Hematology	24	5	29	82,8%
Total	1	0	1	100,0%
Infectiology	12	6	18	66,7%
Infectiology/Dengue,	1	0	1	100,0%
Chikungunya, Zika,				
Microcephaly and				
Aedes Aegypti				
Mastology	6	0	6	100,0%
Family Medicine	1	0	1	100,0%
Nephrology	19	8	27	70,4%
Pediatric Nephrology	3	0	3	100,0%
Neurology		24	73	67,1%
Pediatric Neurology	2	7	9	22,2%
Pediatric Dentistry	1	0	1	100,0%
Ophthalmology	3	9	12	25,0%
Oncology	0	4	4	0,0%
Orthopedics and	62	21	83	74,7%
Traumatology				
Otolaryngology	17	11	28	60,7%
Pediatrics Otolaryn-	5	2	7	71,4%
gology				
Pediatrics	23	9	32	71,9%
Pneumology	15	6	21	71,4%
Pediatrics Pneumology	2	1	3	66,7%
Psychiatry	32	8	40	80,0%
Conventional Radiol-	1	2	3	33,3%
ogy and Computed				
Tomography				
Rheumatology	31	19	50	62,0%
Urology	28	13	41	68,3%
Total	846	311	1157	73,9%

As for the conduct of the family health doctors about maintaining the patient in the unit after carrying out the teleconsultings, it can be observed that 44,8% intend on maintaining the patients in the unit. This rate also varies according to the specialties. There are specialties in which many teleconsultings are carried out, with distinct behaviors regarding maintaining the patient in the unit: hematology, medical clinic, psychiatry, dermatology and gynecology. However, there are other specialties with a bigger number of teleconsultings where these rates are lower: ophthalmology and gastroenterology.

Table 4- Distribution of the teleconsultings according tospecialties, by level of the conduct of the family health doctors, Betim, may 2017 until may 2018

Specialties	Absolute	number of t	eleconsult- of the family	%
	health d	octor to ma	intain the	
	pa	tient in the	unit	
-	YES	NO	Total	Yes
Angiology	11	7	18	61,1%
Cardiology	33	76	109	30,3%
General Surgery	9	1	10	90,0%
Pediatric Surgery	1	0	1	100,0%
Vascular Surgery	2	0	2	100,0%
Medical Clinic	16	36	52	30,8%
Dengue, Chikungunya and dengue	1	0	1	100,0%
Dermatology	121	163	284	42,6%
Endocrinology and Metabolism	27	26	53	50,9%
Pediatric Endocri- nology	2	1	3	66,7%
Nursing and Wound Treatment	1	3	4	25,0%
Gastroenterology	21	17	38	55,3%
Gastroenterology/	7	10	17	41,2%
Pediatric Gastroen- terology	0	1	1	0,0%
Geriatrics	3	9	12	25,0%
Gynecology	9	22	31	29,0%
Gynecology ad ob- stetrics	8	19	27	29,6%
Gynecology/ Human Reproduction	0	1	1	0,0%
Hematology	11	18	29	37,9%
Hematology - pediatric hemoterapy	0	1	1	0,0%
Infectiology	6	2	8	75,0%
Infectiology / Dengue, Chikungunya, Zika, Microcephaly and	1	0	1	100,0%
Mastology	0	Л	6	33.3%
Family Modicino	2	4	1	0.0%
	12	15	י 27	0,0%
тиеноюду	12	10	21	44,4%

Pediatric Nefrology	3	0	3	100,0%
Neurology	31	42	73	42,5%
Pediatric Neurology	6	3	9	66,7%
Pediatric Dentistry	0	1	1	0,0%
Ophtalmology	10	2	12	83,3%
Oncology	3	1	4	75,0%
Orthopedics and	52	31	83	62,7%
Traumatology				
Otolaryngology	17	11	28	60,7%
Pediatric Otolaryn-	2	5	7	28,6%
gology				
Pediatrics	9	23	32	28,1%
Pneumology	11	10	21	52,4%
Pediatric Pneumology	2	1	3	66,7%
Psychiatry	20	20	40	50,0%
Conventional Radiol-	1	2	3	33,3%
ogy and Computed				
Tomography				
Rheumatology	28	22	50	56,0%
Urology	19	22	41	46,3%
Total	518	629	1147	44,8%

When you compare both rates related to maintaining the patient in the health unit in the vision of the teleconsultant and doctor of the Family Health Program, expressed in table 5, one can find a situation in which a decrease in practically all of the specialties occurs, with the last-mentioned sending an important number of the patients for the specialist, regardless of the teleconsultant's orientation. We begin in a situation with 73,9% onto a level of 44,8%. Still, almost half of the participants that had had teleconsultings won't pass through a specialist, which already indicates the benefits of implanting this project in Betim.

Table 5 - Comparison between the absolute number and the% of teleconsultings that should be maintained in the unit,according to teleconsultants and PSF doctors after carryingout the teleconsultings – Betim – may 2017 until may 2018

Specialties	Ab- solute Number to main- tain in the unit accord- ing to telecon- sultants	Main- tain in the unit accord- ing to tele- consul- tants%	Total of Tele- con- sulta- tions	Inten- tion of main- taining in the unit ac- cord- ing to PSF doctor %	Ab- solute num- ber of inten- tions to main- tain in the unit accord- ing to PSF doctor
Angiology	10	55,6%	18	38,9	7
Cardiology	86	78,9%	109	69,7	76
General Surgery	4	40,0%	10	10,0	1

Pediatric Surgery	0	0,0%	1	0	0
Vascular Surgery	1	50,0%	2	0,0	0
Medical Clinic	42	80,8%	52	69,2	36
Dengue, chikungunya and Dengue	0	0,0%	1	0,0	0
Dermatology	228	80,3%	284	57,4	163
Endocri- nology and Metabolism	39	73,6%	53	49,1	26
Pediatric En- docrinology	1	33,3%	3	33,3	1
Nursing Wound Treatment	4	100,0%	4	75,0	3
Gastroenter- ology	22	57,9%	38	44,7	17
Gastroen- terology/ hepatology	9	52,9%	17	58,8	10
Pediatric Gastroente- roology	1	100,0%	1	100,0	1
Geriatrics	11	91,7%	12	75,0	9
Gynecology	28	90,3%	31	71,0	22
Gynecology and Obstet- rics	21	77,8%	27	70,4	19
Gynecology/ Human Re- production	1	100,0%	1	100,0	1
Hematology	24	82,8%	29	62,1	18
Total	1	100,0%	1	100,0	1
Infectiology	12	66,7%	18	25,0	2
Infectiology/ Dengue, Chikungun- ya, Zika, Microcephaly and Aedes aegypti	1	100,0%	1	0,0	0
Mastology	6	100,0%	6	66,7	4
Family Med- icine	1	100,0%	1	100,0	1
Nephrology	19	70,4%	27	55,6	15
Pediatric Nephrology	3	100,0%	3	0,0	0
Neurology	49	67,1%	73	57,5	42
Pediatric Neurology	2	22,2%	9	33,3	3

Pediatric Dentistry	1	100,0%	1	100,0	1
Ophtalmol- ogy	3	25,0%	12	16,7	2
Oncology	0	0,0%	4	25,0	1
Orthopedics and Trauma- tology	62	74,7%	83	37,3	31
Otolaryngol- ogy	17	60,7%	28	39,3	11
Pediatric Otolaryngol- ogy	5	71,4%	7	71,4	5
Pediatrics	23	71,9%	32	71,9	23
Pneumology	15	71,4%	21	47,6	10
Pediatric Pneumology	2	66,7%	3	33,3	1
Psychiatry	32	80,0%	40	50,0	20
Conventional Radiology and Comput- ed Tomog- raphy	1	33,3%	3	66,7	2
Rheumatol- ogy	31	62,0%	50	44,0	22
Urology	28	68,3%	41		22
Total	846	-	1157	-	629

In table 6, it can be observed that when one carries out an analysis of variance, there are significant differences between the distinct specialties, regarding maintaining the patient in the units according to teleconsultants just as in the PSF's vision.

Table 6 - Comparison between maintaining in the units according to teleconsultants ad intention to maintain in the units according PSF's doctor, after carrying out teleconsultings, in chosen specialties and analysis of variance

Specialties	Absolute Number Maintain in the unit accord- ing to telecon- sultants	wMain- tain in the unit accord- ing to tele- consul- tants%	Total of tele- con- sult- ings	Maintain in the unit ac- cording to PSF doctor %	Absolute Number – Main- tain in the unit accord- ing to PSF doctor	F P
Cardiology	86	78,90%	109	76	69,7	0,001
Medical Clinic	42	80,80%	52	36	69,2	0,001
Dermatology	228	80,30%	284	163	57,4	0,001
Neurology	49	67,10%	73	42	57,5	0,001
Orthopedics and Trauma- tology	62	74,70%	83	31	37,3	0,001
Other	379	68,16	556	281	50,5	0,001
Total	846	73,1	1157	629	54,4	

Discussion

The reached results with the use of telehealth in assistance realities in many systematic reviews already sow evidences in many areas such as diabetes, hypertension, kidney diseases, dermatology, pregnancy and ICU. In Brazil, the carried-out studies about user satisfaction show that the family health doctors are satisfied with the carried-out teleconsultings. In this study it was also found that 94,5% are satisfied with the teleconsultings. In Santa Catarina, in a qualitative study17, the evaluation of the users was "happy" in 15 teleconsultings, but ten of these evaluated that it partially attended to its doubt. Three were evaluated as very happy and attended totally and in two, indifferent, one evaluated that it attended partially, and the other didn't inform. A study21 in Minas Gerais concluded that 95% of the professionals said they were happy with the teleconferences.

A study of asynchronous teleconsulting22 aimed exclusively to general practitioners that act in primary care in health in a rural area in Italy evaluated 927 teleconsultings in cardiology, 18 in dermatology and 12 in endocrinology. Most of the participating doctors was very happy with the teleconsulting, the connection and the necessary equipment for the remote data transmission to the many specialties were considered satisfactory, and the quality of the specialists' suggestion in clinical problems was considered good.

A study carried out in North Carolina23, evaluated teleconsulting in dermatology, carried out by the primary care health professionals, destined to a rural area in North Carolina, United States, in which the professional requested clinical information and photos of some injuries, by e-mail for two dermatologists. In this study, 32% of the teleconsultings were classified as very useful by the health professionals, 54% as useful and 11% as useful, with a change in the initially provided in 17 cases (21%).

This study carried out here in Betim found out that in 73,9% of the teleconsultings the patients can be kept in the health unit itself, without referring him to specialists in the opinion of teleconsultants. This data supports studies carried out in Minas Gerais21 and in Rio de Janeiro24 that say respectively, that in 78% and 68,8% of the cases the teleconsultants also evaluated that the patients could continue in the health center itself. The study also observes an important difference between the distinct specialties, which raises the need to know these percentages so that the projects of approaching lines in the different specialties can present adequate results. Depending on the specialty, conducts of the teleconsultants regarding keeping the patient in the unit can be observed and vary between 25% and 91,8% in the specialties with the biggest number of teleconsultancies.

A result that causes a stir in this study is the fact that a there is a much more significant distance between the indication of the teleconsultants to keep the patients in the unit and the indication of the family health doctors about this matter. This range varies between 73,9% and 44,8% putting an important challenge to the teleconsulting projects – which strategy can be put together to reduce this distance. The study also showed that this variance presents statistically

significant differences depending on the specialty.

This finding puts more complexity in the process of incorporating the telehealth resources in the Brazilian public network. Despite the advances, there are still great questions that need to be dealt with so that the incorporation process to present its full potential.

Conclusion

Teleconsultings have a good evaluation by the family health doctors. However, teleconsultants indicate that 73,9% of the patients must stay in the basic units while the family health doctors indicate that less than 45% of the patients must be kept in the basic health units, configuring a situation of more difficulties for the process of incorporating telehealth in assistance realities. This constitutes another challenge for the national telehealth project to structure strategies to overcome them, deepening the process of incorporating telehealth resources in the Brazilian public network.

References

- World Health Organization. Atlas of eHealth country profiles 2015: The use of eHealth in support of universal health coverage [internet], February 2016. Geneve: Global Observatory for eHealth; 2016 [access on date unknow]:392. Available in: http://www. who.int/goe/publications/atlas_2015/en/
- Santos AF, Sobrinho DF, Araujo LL, Procópio CSD, Lopes EAS, Lima AMLD, Reis CMR, Abreu DMX, Jorge AO, Matta-Machado AT. Incorporação de tecnologias de informação e comunicação e qualidade na atenção básica em saúde no Brasil [Artigo em Inglês, Espanhol]. Cad Saúde Pública. 2017:33(5): e00172815. Epub June 05, 2017.
- Maldonado JM, Marques AB, Cruz A. Telemedicine: challenges to dissemination in Brazil [internet] [Article in English, Portuguese]. Cad Saude Publica. 2016 Nov 3 [access on date unknow];32Suppl 2(Suppl 2):e00155615. In: PubMed: PMID: 27828681
- Oliveira TC, Oliveira Junior JG, Tavares G, Rigato AFG, Pereira FWA, Carvalho FFB. O programa nacional telessaúde Brasil redes: uma perspectiva histórica e situacional. Latin Am J telehealth. 2017;4(2):104-13.
- Marcolino MS, Alkmim MB, Bonisson L, Minelli Figueira R, Ribeiro AL. 2,000,000 Electrocardiograms by Distance: An Outstanding Achievement for Telehealth in Brazil. Stud Health Technol Inform [internet]. 2015 [access on date unknow];216:991. In: PubMed: PMID:26262293

- de Araújo JS, Regis CT, Gomes RG, Mourato FA, Mattos SD. Impact of Telemedicine in the Screening for Congenital Heart Disease in a Center from Northeast Brazil [internet]. J Trop Pediatr. 2016 Dec [access on date unknow];62(6):471-76. In: PubMed: PMID: 27273306
- Moraes ERFL, Paola AAV, Kanaan EE, Salvador Junior PR, Carvalho ACC, Cirenza C, Franco MC. Prevalência de bloqueios atrioventriculares em pacientes da Atenção Básica de Saúde: análise por telemedicina [Artigo em Inglês]. Relampa. 2016;29(1):12-5
- Galdino MM, Hazin SM, de Araújo JS, Regis CT, Rodrigues KN, Mourato FA, Mattos Sda S. Diagnosis and management of Transposition of great arteries within a pediatric cardiology network with the aid of telemedicine: A case report from Brazil [internet]. J Telemed Telecare. 2016 Apr [access on date unknow];22(3):179-82. In: PubMed: PMID:26159438
- Malerbi FK, Matsudo NH, Carneiro ABM, Lottenberg CL. Retinal diseases in a reference center from a Western Amazon capital city [Article in Portuguese] [internet]. Einstein (Säo Paulo). 2015 Oct-Dec [access on date unknow];13(4): 530-4. In: Pub Med: PMID: 26761550
- Piccoli MF, Amorim BD, Wagner HM, Nunes DH. Teledermatology protocol for screening of skin cancer [internet]. An Bras Dermatol. 2015 Mar-Apr [access on date unknow];90(2):202-10. In PubMed: PMID: 25830990
- 11. Barbosa IA, Silva MJP. Nursing care by telehealth: what is the influence of distance on communication?. Rev Bras Enferm. 2017 [access on date unknow];70(5):928-34.
- Nascimento CMB, Lima MLLT, Sousa FOS, Novaes MA, Galdino DR, Silva ECH, Sá Leitão GG, Silva TPS. Telefonoaudiologia como estratégia de educação permanente na atenção primária à saúde no Estado de Pernambuco. Rev CEFAC. 2017 [accesso em data desconhecida];19(3):371-80.
- Moreira Lucena A, de Araújo Brandão Couto E, Soares Garcia V, Moreira Alkmim MB, Marcolino MS. Teleconsultorias de fonoaudiologia em um serviço público de telessaúde de larga escala. CEFAC. 2016 Nov-Dec [accesso em data desconhecida];18(6):1395-403.
- Florentino DM, Silva KM, Souza MIC. Análise de utilização de webseminários assíncronos do Telefisioterapia Núcleo Telessaúde Rio de Janeiro. Latin Am J telehealth. 2017;4(2):140-44.

- 15. Pentapati KC, Smriti K, Gadicherla S. WhatsApp: a telemedicine platform for facilitating remote oral medicine consultation and improving clinical examinations-a commentary [internet]. Oral Surg Oral Med Oral Pathol Oral Radiol. 2016 May [access on date unknow];121(5):573. In: PubMed: PMID: 27068315. Epub 2016 Feb 16.
- Caldarelli PG, Haddad AE.Teleodontologia em consonância com as Diretrizes Curriculares Nacionais no desenvolvimento de competências profissionais [Artigo em Inglês, Português]. Rev ABENO. 2016 Apr-Jun;16(2):25-32.
- Nilson LG, Natal S, Maeyama MA, Dolny LL, Calvo MCM. Estudo comparativo da oferta de teleconsultorias por teleconsultores de diferentes níveis de atenção à saúde. Rev APS. 2017 Jul 20;20(3):360-72.
- 18. Harzheim E, Gonçalves MR, Umpierre RN, da Silva Siqueira AC, Katz N, Agostinho MR, Oliveira EB, Basso J, Roman R, Dal Moro RG, Pilz C, Heinzelmann RS, Schmitz CA, Hauser L, Mengue SS. Telehealth in Rio Grande do Sul, Brazil: Bridging the Gaps [internet]. Telemed J E Health. 2016 Nov [access on date unknow];22(11):938-44. Epub 2016 Apr 20. In: PubMed: PMID: 27096384
- Oliviera DG, Frias PG, Vanderlei LC, Vidal SA, Novaes Mde A, Souza WV. Analysis of the implementation of the TeleHealth Program in Pernambuco State, Brazil: a case study [Article in Portuguese, Spanish] [internet]. Cad Saude Publica. 2015 Nov [access on date unknow];31(11):2379-89. Access on date unknow. In: PubMed: PMID: 26840817
- Piropo TGN, Amaral HOS. Telessaúde, contextos e implicações no cenário baiano [Artigo em Inglês]. Saúde debate. 2015 Jan-Mar;39(104):279-87.
- 21. Marcolino MS, Pereira Afonso dos Santos J, Santos Neves D, Alkmim MB. Teleconsultations to Provide Support for Primary Care Practitioners and Improve Quality of care--the Experience of a Large Scale Telehealth Service in Brazil [internet]. Stud Health Technol Inform. 2015 [access on date unknow];216:987. In: PubMed: PMID: 26262289
- Callahan CW, Malone F, Estroff D, Donald A, Person DA. Effectiveness of an Internet-based store-and-forward telemedicine system for pediatric subspecialty consultation [internet]. Arch Pediatr Adolesc Med. 2005 Apr [access on date unknow];159(4):389-93. In: PubMed: PMID: 15809396

- 23. Vallejos QM, Quandt SA, Feldman SR, Fleischer AB Jr, Brooks T, Cabral G, Heck J, Schulz MR, Verma A, Whalley LE, Arcury TA. Teledermatology consultations provide specialty care for farmworkers in rural clinics [internet]. J Rural Health. 2009 Spring [access on date unknow];25(2):198-202. In PubMed: PMID: 19785587
- 24. Gismond JP, Santos AMM, Becario MR. La teleconsultoría asincrónica en la salud primaria: la experiencia del Núcleo de Telesalud del Estado de Río de Janeiro del Programa Nacional de Telesalud Brasileño. Latin Am J telehealth. 2017;4(1):045-50.

Financing: Own incentive

Conflict of interests: The authors declare that there was no conflict of interests

How to cite this article: Trento MA. Comparition between indication for referrals of the teleconsultant and the family health doctor: the Betim, Minas Gerais case. Latin Am J telehealth, Belo Horizonte, 2018; 5 (2): 157-165. ISSN: 2175_2990