

A Cohort Study of Early Cardiologist Consultation by Telemedicine on the Critical Non-STEMI Inpatients

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Abstract : Objectives: To find out the more effect of early cardiologist consultation using a simple technology on the diagnosis and early proper management of patients with Non-STEMI at emergency department of district hospitals without cardiologist on site before transferred. Methods: A cohort study was performed in Udonthani general hospital at Udonthani province. From 1 October 2012–30 September 2013 with 892 patients diagnosed with Non-STEMI. All patients mean aged 46.8 years of age who had been transferred because of Non-STEMI diagnosed, over a 12 week period of studied. Patients whose transferred, in addition to receiving proper care, were offered a cardiologist consultation with average time to Udonthani hospital 1.5 hour. The main outcome measure was length of hospital stay, mortality at 3 months, inpatient investigation, and transfer rate to the higher facilitated hospital were also studied. Results: Hospital stay was significantly shorter for those didn't consult cardiologist (hazard ratio 1.19; approximate 95% CI 1.001 to 1.251; $p=0.039$). The 136 cases were transferred to higher facilitated hospital. No statistically significant in overall mortality between the groups ($p=0.068$). Conclusions: Early cardiologist consultant can reduce length of hospital stay for patients with cardiovascular conditions outside of cardiac center. The new basic technology can apply for the safety patient.

Keywords : critical, telemedicine, safety, non STEMI

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