

693 Are Virtual Clinics the New 'Normal'? – A Single-Institution Comparative Analysis of Outcomes and Cost-Effectiveness of Virtual and Face-To-Face Clinics

D. Hassanzadeh-Baboli, A. Pavithran, I. Khawaja, Z. Maan,
A. Deshpande
Colchester General Hospital, Colchester, United Kingdom

Introduction: The coronavirus (COVID-19) pandemic has had a profound impact on clinicians, hospital resources and patients. Urology Virtual clinics (VCs) were initiated at our institution to ensure continued provision of service during the pandemic. The study aim was to analyse outcomes and cost-effectiveness of VCs compared to pre-COVID-19 face-to face (F2F) clinics.

Method: We retrospectively analysed the VCs from 18th March 2020 to 1st July 2020 and compared them to F2F clinics in the same period in 2019. Clinical outcomes were compared, and potential financial savings were estimated to see if VCs can be incorporated into future practice.

Results: 1317 patients were reviewed in 2020 as compared to 1941 in 2019. We noted similar rates of discharges [25.4% (2020) v/s 24.1% (2019)], follow-ups (48.7% (2020) v/s 48.4% (2019)) and patients who did not attend/answer (6.8% (2020) v/s 6.6% (2019)). Potentially, over £100,000 can be saved by changing 50% appointments to VCs.

Conclusions: Our data shows that VCs are non-inferior to F2F clinics and have allowed continued effective service provision during the COVID-19 pandemic. There is potential to incorporate VCs into future practice without compromising on efficacy. Further data collection and analysis is ongoing at our institution on a larger scale.