

**Submission Id: 4114**

**Title**

*Determining best communication practices in telemedicine abortion care:  
Qualitative study of patient perspectives*

**Priority 1 (Research Category)**

Qualitative research

**Presenters**

Emily Godfrey, MD, MPH, Anna Fiastro, MPH, MEM, Molly Ruben, MPH, Elizabeth Young, MD, MSc, Ian Bennett, MD, PhD, Elizabeth Jacob-Files, MA, MPH

**Abstract**

Context: Abortion care using novel no-test telemedicine protocols and delivery of abortion pills by mail provides an historic opportunity for primary care to include medication abortion as part of the comprehensive reproductive care provided to patients. Because in-person care in the clinical setting was the only model, it is unknown whether communication practices by clinicians warrants a shift with telemedicine abortion. Objective: to evaluate best practices in patient-provider communication for telemedicine abortion care. Study Design/Analysis: We conducted in-depth interviews and used inductive-deductive constant comparative analysis. A community advisory board guided our interview guide and interpretation of findings. Setting: High-volume reproductive healthcare clinic organization with several satellite locations throughout Washington State. Population Studied: Patients who recently sought either in-clinic or telemedicine medication abortion services with licensed advance practice and family medicine providers. Instrument: Miller's conceptual framework for patient-clinician communication in telemedicine settings shaped the interview guide. Outcome Measures: Decision to choose in-clinic or telemedicine services and experiences with scheduling process, attending the appointment and communication of the clinician. Results: 30 research participants, 20 telemedicine and 10 in-clinic, completed the interview. Telehealth patients reported similar levels of interpersonal connection to their providers as in-clinic patients, including feeling their provider was relatable, supportive, affirming of their decision, not-rushed, empathetic, and an attentive listener. Some telehealth patients reported an enhanced communication experience due to their decreased anxiety and stress from avoiding an in-clinic visit. Both groups of patients understood the plan of care, including how to obtain and take medications, and felt empowered to garner personal and medical support as necessary. All patients relied heavily on printed clinic materials and online resources to answer symptomatic questions during the abortion process. Conclusions: Patients receiving either telemedicine or in-clinic abortion services by primary care providers reported similar interpersonal and medical information communication experiences. Challenging contextual factors reported by some in-clinic patients suggests telehealth as a favorable option for medication abortion care services.