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Virtual Triage guides patients to the right care in an ambulatory setting

Abstract

The study, published on June 12, 2024, in the International Journal of Healthcare, evaluated the impact of AI-based virtual triage and care referral (VTCR) on patient care intent and seeking in an ambulatory setting. Researchers analyzed 8,088 online encounters to understand how VT influenced patient behavior in engaging different levels of care acuity. The system is designed to evaluate patients' care intentions and to help align patients with the appropriate care that is actually needed based on their clinical presentation. VTCR was found to reduce unnecessary in-person visits and promoted virtual care among patients seeking care in a leading ambulatory care system.



✓ PEER REVIEWED

Results

19.1%

increase in patients opting for virtual care options such as e-visits and telephone consultations 12.5%

decrease in outpatient care seeking, including in-person and video consultations

4 35.0%

of all patients altered their care seeking behaviors following VT recommendations, and among patients whose care intent differed from VT, half altered their care seeking in alignment with the recommendation of VTCR

The AI-based VTCR system influenced patient behavior and virtual care engagement, reducing unnecessary in-person visits and streamlining care delivery, potentially enhancing overall healthcare efficiency in ambulatory settings.

Scale of Influence

The study demonstrated a substantial influence of the Al-based virtual triage and care referral system, with 35.0% of all patients altering their care seeking behaviors as a result of VT recommendations, and among half of those whose care intent differed from VTCR. This highlights the technology's significant role in guiding patients towards more appropriate care levels.

Impact & Opportunities:

- Enhanced Care Efficiency
- Increase Virtual Care Adoption
- Enable Data-Driven Decision Making

Read the full study and contact Infermedica to learn more about our AI-powered virtual triage.