

Video consulted patients rounds at department of heamatology - experiences of relatives

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BACKGROUND

- Prevalens and incidence
- The influence of family
- Important decisions
- Difficulties with participation



AIM

**Investigate how relatives experience
to participate in video consulted
patient rounds**



VIDEO CONSULTED PATIENT ROUNDS AT DEPARTMENT OF HEAMATOLOGY

- Oct 2017- Jan 2018
- Preselection of patients
- Inclusionscriteria
- Contact with relatives
- Participate without physically presence

METHODS

- Qualitative study
- Semistructered interview (N=10)
- Sampling
- Field observational studies 5 weeks
- Dataanalyze:
Interpretative
Phenomenological
Analysis

	AGE	GENDER	EDUCATION	RELATION	PARTICIPATION
1	52	Female	Social worker	Daughter	1
2	72	Female	Teacher	Wife	1
3	52	Male	Engineer	Son	2
4	51	Female	Office assistant	Daughter in law	1
5	52	Female	Med. Lab. technologist	Daughter	1
6	45	Female	Health Care professional	Daughter	1
7	50	Female	Director	Daughter	3
8	55	Female	Nurse	Daughter	1
9	30	Male	Chef	Son	1
10	65	Female	Social worker	Daughter	1

RESULTS

- Two pairs of ears are better than one
- Freedom and flexibility
- Able to be there supporting the patient, without physically presence
- Limitations with serious conversations



QUOTES

It's important for her, that I participate, but I'm not able to because of my work. This solution makes it possible to support her with a minimum of interference in my work life (Daughter in law, 51).

QUOTES

If the topics get serious, such as the treatment doesn't work anymore, I would like to be present. I have to be able to give him a hug (Wife, 72).

CONCLUSION

- Participation in a more flexible way
- Increased support
- Qualify the conversation
- No replacement of physically presence



FUTURE RESEARCH

**Implementation of the project at
Department of Oncology
Further interviews with relatives (n=10)
Interviews with patients (n=20)**

