

*This appendix is a supplement to the article has not been editorially processed*

## Evaluation of video consultations at Diakonhjemmet

### Sex

- Woman                       Man

### Age

- Younger than 20 years  
 20–29 years  
 30–39 years  
 40–49 years  
 50–59 years  
 60–69 years  
 70–79 years  
 80 years or older

### Are you in paid work?

- Yes                               No

### Which rheumatic disease do you suffer from?

- Rheumatoid arthritis  
 Spondyloarthritis  
 Psoriatic arthritis  
 Other rheumatic disease

### For how long have you had the disease?

- Less than one year  
 1–4 years  
 5–10 years  
 More than 10 years

### Assessment of your disease activity

Please assess the activity of your rheumatic disease over the last week. When taking all symptoms into account, how do you rate your condition?

0      1      2      3      4      5      6      7      8      9      10  
Good, no      Very poor  
symptoms

### Assessment of your rheumatic disease

Think back on how your rheumatic disease has affected you during the last week. If your condition remained the same over the coming months as it has been in the last week, would that be acceptable or unacceptable for you?

Acceptable       Unacceptable

### What type of consultation did you have?

- Video consultation
- Telephone consultation
- Did not have the consultation

### What was the reason for this consultation?

- Check-up of ongoing treatment
- Consultation associated with onset of new symptoms
- Information about test results
- Other \_\_\_\_\_

### With which therapist did you have the consultation?

- Doctor       Nurse

### Have you had any contact with this therapist previously?

- Yes       No       Don't remember

### Do you have any previous experience with video consultations?

- Not at all     To a small extent     To some extent     To a great extent

**Do you have any previous experience with other forms of communication that use video** (such as Skype, Zoom, Teams, Facetime, WhatsApp)?

- Not at all       To a small extent       To some extent       To a great extent

**What was the reason why the consultation was not undertaken by video?**

- I wished to have the consultation by telephone
- Technical problems meant that the consultation was undertaken by telephone
- I had not received a text message with a link to log in for a video consultation
- Other \_\_\_\_\_

**Where was the video consultation held?**

- At home
- At work
- Other location

**Did any technical problems occur during the video consultation?**

- No                       Yes

**If yes, what kind of problems occurred?**

- Video problems
- Audio problems
- Connection problems
- Unstable internet
- Other \_\_\_\_\_

**What device did you use to attend the video consultation?**

- Mobile phone (Android)
- iPhone
- Tablet computer (Android)
- iPad
- PC
- Mac

**Please rate your satisfaction with the video consultation you had with your therapist.**

0 1 2 3 4 5 6 7 8 9 10  
Very dissatisfied Very satisfied

**How well suited was video conferencing for this consultation?**

0 1 2 3 4 5 6 7 8 9 10  
Very dissatisfied Very satisfied

### **Questions about your consultation**

Please indicate how much you agree or disagree with the statements below

	Fully agree	Partly agree	Neither agree nor disagree	Partly disagree	Fully disagree
I felt that the communication with my therapist went well	1	2	3	4	5
I missed having a consultation in person at the hospital	1	2	3	4	5
It's a great advantage for me that the video consultation saves time and travel	1	2	3	4	5
Having video consultations makes me less dependent on others	1	2	3	4	5
Given the current infection pressure, I would like to have future consultations by video conference	1	2	3	4	5
If the infection in society later becomes insignificant, I would still like to continue having future consultations by video conference	1	2	3	4	5
My requirements for data protection were ensured during the video consultation	1	2	3	4	5

### Questions about your consultation

Please indicate how much you agree or disagree with the statements below.

	Fully agree	Partly agree	Neither agree nor disagree	Partly disagree	Fully disagree
I had the opportunity to describe my health status	1	2	3	4	5
The therapist showed an interest in my health status	1	2	3	4	5
I felt that it was easy to ask my therapist questions	1	2	3	4	5
I felt as well cared for in the video consultation as in a regular consultation at the hospital	1	2	3	4	5
The video consultation made it harder to understand the therapist	1	2	3	4	5
It was problematic that the therapist could not examine me	1	2	3	4	5
I am familiar with the further plan for treatment of my condition	1	2	3	4	5
I had time to ask the therapist all the questions I wanted	1	2	3	4	5
I received answers to all the questions I had for my therapist	1	2	3	4	5
I feel healthier when having a consultation without having to go to the hospital	1	2	3	4	5

### What has been further planned after this consultation?

- Regular check-up
- Start on new medication
- Change the dosage of the medication
- Scheduled for a new appointment at the outpatient clinic in the near future
- Will take contact as needed
- Other \_\_\_\_\_