**Abstract – Rheumatology Outpatient Clinic Backlog**

**Title:**

*Using novel remote electronic monitoring to deal with the Rheumatology backlog generated by COVID-19*

**Authors:**

**Introduction**

During the COVID-19 pandemic we were unable to provide regular outpatient services for patients with chronic rheumatic diseases. A “backlog” of approximately 6800 patients without an allocated follow-up appointment accrued by September 2021. We quantified this cohort and analysed attempts to deliver care remotely (using video, telephone and electronic remote management forms (RMFs)).

**Methods:**

We selected a 12-month “window” May 2020-May 2021 and analysed the number of patients awaiting follow-up during this period, which included 3259/6812. We revisited the number of patients remaining in that cohort on four occasions between September 2021 and March 2022.

**Results**

The number of patients without allocated follow-up reduced from 3259 to 960 by March 2022 (71% reduction). There was a significant, progressive reduction in the number of patients during all four assessments (p<0.001 – Chi-square test for trend).

Of the 1956 RMFs completed between September 2021-March 2022, only 261 recorded a previous appointment date. 154/261 (59%) were completed by patients in the “window”, indicating a preferential use of RMFs targeting backlog patients. Between 2-8% of the backlog was managed using RMFs.

**Conclusion**

We have significantly reduced the backlog of outpatient follow-up due to COVID-19 over a 6-month period, and remote management forms make a sizeable contribution to this reduction. These results likely underestimate the effect of RMFs due to this dataset being incomplete.

**[FIGURES OVERLEAF]**

**Figures**

**Chart

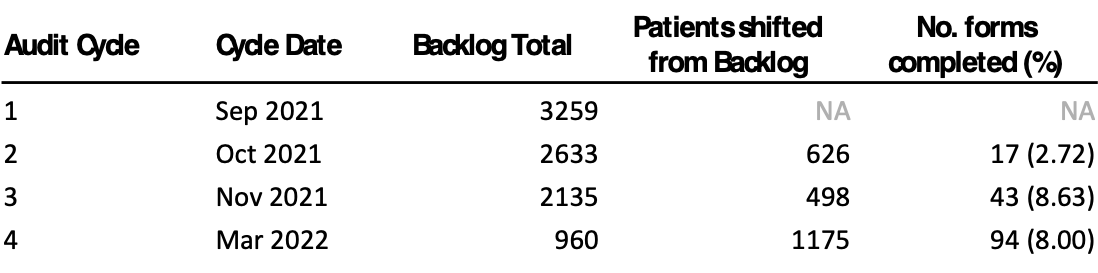
Description automatically generatedFigure 1**

**Figure 2**

**Chart, bar chart

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**Table 1**

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