

Shivangi Sinha

At the start of March 2020, I was shadowing a surgeon. In one round, I met a lower-income patient who was also a double amputee. I was horrified when the surgeon spent only 5 minutes with this patient before noting they could go home. Though it may seem mundane, home for them was Pahrump, NV. Thus, this patient had to drive *at least* 1-hour each way for a 5-minute check-up. In complete awe, I asked the surgeon why the patient had to travel here. I then heard the words that shaped me: “Shivi – Las Vegas is the *only* place they can get seen.” Shaken and confused, I went home and Googled “healthcare access in Nevada.” It was then that I read about telemedicine as a solution for rural healthcare.

Then COVID-19 changed our world, and telemedicine became relevant for *everybody*.

Though I was disheartened to go remote, it did not deter me from reaching out to Dr. Thompson-Robinson about telemedicine research. While waiting to hear back, I accessed the Library Quick Search feature to see if anyone had investigated telemedicine acceptance. As I perused peer-reviewed articles, I found credible studies focused on telemedicine uptake among healthcare providers, but none considered what factors were important for patients. At a time when telemedicine became the only option for a lot of us, I experienced the “aha” moment about what I wanted to investigate.

As I began virtually meeting with Dr. Thompson-Robinson, she encouraged me to apply to the Research Honors program. Soon, I realized how overwhelming the process would be. I had never done a literature review, studied public health models, or applied for IRB approval. I struggled with differentiating between different search engines and how to organize the dozens of PDFs I was downloading. Though I had so much information, I had no way to sift through it efficiently.

I had made an appointment to meet with librarian Xan Goodman to discuss these difficulties. Though nervous, I was amazed at how much I learned. Ms. Goodman opened my eyes to citation managers like RefWorks and search engines like PubMed and Web of Sciences. I learned about Boolean search terms to specify what I was looking for and how to use the advanced search options. With this, I could finally evaluate resources that were not only timely but also credible and diverse. After this, I spent hours of my day on the 3rd floor of Lied. Per Ms. Goodman's recommendations, I created a reference manager to keep track of my citations. In addition to scientific literature, I accessed up-to-date information from government agencies like the Centers for Disease Control and Medicare. We had to narrow our scope with each draft given our one-year time constraint, so Dr. Thompson-Robinson and I edited the initial four research questions into the final two – emphasizing COVID-19's context.

My greatest hurdle was understanding the SPSS data software and creating a questionnaire that assessed the relationships between the independent variables and telemedicine uptake. Though some studies had sample survey questions, they lacked new factors like COVID-19. Imposter syndrome struck so many times. Whenever I asked for more help, I was met with empathy. I was not the first to cry over research, nor would I be the last! With Dr. Thompson-Robinson's guidance and SPSS manuals from Lied, I got better at utilizing traditional resources such as textbooks to learn about data management and the relevant statistical relationships.

After months of data collection from my survey, the knowledge I acquired through these manuals clicked. I was challenged at points when certain relationships I assumed would be present were statistically insignificant. I had to remember the scientific process and trust the data; research only builds with time and evidence. While I know my thesis is not perfect, I developed a critical research skillset and examined telemedicine uptake factors for patients. I am

proud to have been able to add a novel perspective to this field and place patients' needs first, especially given the context of COVID-19. Telemedicine remains integral to me, and I wish to extend this scholarly interest in graduate school where I will further hone my research acumen.