Mixed Methods: COVID-19 Follow Up Patterns and Concerns in Northwest Indiana Marcy Simpson¹, Olajumoke Bamgbose, Harpriya Singh, Aaron Mckay, Matthew O'Connor² ¹Indiana University School of Medicine; ²The Methodist Hospitals

Background/Hypothesis: Coronavirus 2019 (Covid-19) in the state of Indiana garnered over 50,000 positive cases since the first exposed patient in March 2020. Covid-19 is associated with pneumonia, as well as symptoms such as fevers, cough, shortness of breath, loss of taste/ smell, and fatigue. A positive COVID diagnosis is prevalent amongst those with comorbidities and has been positively correlated with the severity of the adverse effects caused by Covid-19. As the number of positive cases rise in the US, it's imperative to understand the potential shortcomings experienced in the care of patients and to address the short and long-term outcomes in those patients. This study aimed to identify patterns in the course of illness, limitations of care, effects on co-morbidities, and overall community needs to improve patient access and outcomes. We hypothesize that subjects with comorbidities will report more serious symptoms at onset and take longer for symptoms to resolve. We also expect to see subjects living in the same zip codes will report similar levels of access to care.

Methods: In order to achieve these goals we conducted semi-structured, one-on-one interviews with study participants, in which telephone based patient follow up interviews were conducted twice a week for 2 weeks or until symptoms were resolved. Inclusion criteria included being a legal adult over 18 years of age, a COVID-19 positive diagnosis via RT-PCR testing, and an ED visit at one of the Methodist Hospital Systems.

Results: Through TACTIC qualitative rapid analysis of the data, results are pending and we hope to find useful patterns within a younger demographic, more indicative of the second wave of COVID spread within our Northwest population.

Potential Impact: Through this study, we aim to identify the barriers to care in the community and then address and provide possible solutions within the community.