

Supplementary material to article by C.S. Kruse et al. "Factors influencing the adoption of telemedicine for treatment of military veterans with post-traumatic stress disorder"

Table SI. Description of all the studies included (n = 28)

Author	Facilitator	Theme	Barrier	Theme
Weirwille et al. (12)	Access to rural population Decreased travel costs for patients Comparable effectiveness Reduced privacy concerns	Accessibility Cost reduction Effectiveness Positive patient perception		
Gros et al. (13)	Similar symptom reduction High patient satisfaction General acceptance of telemedicine by veterans	Effectiveness Positive patient perception Positive patient perception		
Engel et al. (14)	Comparable effectiveness (to in-person)	Effectiveness	Confidentiality concerns	Negative patient perception
Miller et al. (15)	Veterans interested based on surveys conducted	Positive patient perception	Veterans without access to mobile devices that support software	Access to technology
Acierno et al. (16)	Veterans have access to internet-capable device Comparable effectiveness	Convenience Effectiveness	Logistics (hardware, bandwidth, technology)	Technology complication
	Access to rural population Overcome stigma Decreased costs to patient (gas, time off work)	Accessibility Positive patient perception Cost reduction	Limited on site resources for technical problems Lack of devices/modalities for delivery of services Affordability/lack of high-speed internet	Access to technology Access to technology Access to technology
Whealin et al. (17)	Comparable dropout rate Access to rural population Minimize costs to patients Scheduled space/rooms not needed	Effectiveness Accessibility Cost reduction Accessibility	Limited access to modalities	Access to Technology
	Comparable effectiveness Decreased issues with stigma (able to stay in comfort of own home often)	Effectiveness Positive patient perception		
Engel et al. (18)	Social network engagement Ease of access Access to rural population	Supportive community Accessibility Accessibility		
Yuen et al. (19)	Family involvement in home environment Ease of use on everyday mobile device	Supportive community Accessibility	Lack of physician availability	Physician availability
Fortney et al. (20)	Access to rural population	Accessibility		
Erbes et al. (3)	Access to treatment using cell phone or tablet Veterans are interested Provides venue for self-assessment Prompts/reminders of helpful coping skills	Accessibility Positive patient perception Accessibility Accessibility		
Price & Gros (21)	Decreases costs of treatment (for provider) Experienced clinicians with technology and ability to troubleshoot issues	Cost reduction Accessibility	Limited prior exposure/knowledge of telehealth as an option Limited confidence in effectiveness Perception of technology as a nuisance (especially amongst older veterans)	Uninformed patients Negative patient perception Negative patient perception
Hernandez-Tejada et al. (22)	Unaffected patient-provider relationship (positive) Fewer logistical issues (parking, weather, childcare, transportation)	Positive patient perception Accessibility	Negative perception of improvement and effectiveness Perception of technology as a nuisance/intolerable	Negative patient perception Negative patient perception
Castro (23)	Access to rural population	Accessibility		
Stecker et al. (24)	Decreased issues with stigma of mental care (earlier engagement)	Positive patient perception		
Morland et al. (25)	Decreased costs (transportation, travel time, and missed work) Enhanced access to rural population and vets with injuries Less scheduling conflicts	Cost reduction Accessibility Accessibility		
	Comparable effectiveness	Effectiveness		
Musdal et al. (26)	Reduction in costs for patient and provider Increased access to rural population	Cost reduction Accessibility	Availability of competent physicians in PTSD treatment Upfront costs of technology or software for treatment of PTSD with telemedicine	Physician availability Access to technology
Ziamba et al. (27)	Accessibility to care Convenient Unaffected patient-provider relationship (positive)	Accessibility Convenience Positive patient perception	Availability of trained providers due to geographic isolation	Physician availability
Litwack et al (28)	Enhance access to rural population Reported comfort with teleconferencing Reported convenience Bypass stigma (due to privacy of being in own home often)	Accessibility Positive patient perception Accessibility Positive patient perception		
Brooks et al. (29)	Mobile method increased access to rural population	Accessibility	Programs can be vague and broad; meant to serve wide range of individuals so lacks specificity/personalization	Uniformity of Treatment
Xu et al. (30)	Cloud access/ease of access of patient information and progress Increased access to rural population	Accessibility Accessibility	Complicated installation (on mobile devices and on site software) Maintenance and loading of software	Technology complications Technology complications
Niles et al. (31)	Reduced privacy concerns Reported convenience Engaged young and older veterans	Positive patient perception Accessibility Effectiveness		
Strachan et al. (32)	Age/demographic did not affect overall effectiveness of treatment delivered via telemedicine	Effectiveness		

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Table SI. cont.

Author	Facilitator	Theme	Barrier	Theme
Shore et al. (33)	Improved access to rural population	Accessibility		
	Reported ease and convenience	Accessibility		
	Improved access to physicians (can work remotely)	Accessibility		
	Patient and provider satisfaction	Positive patient perception		
	Perceived feasibility	Positive patient perception		
Gros et al. (34)	Reduced costs (reduced hospital visits)	Cost reduction		
	Decrease patient costs (transportation, travel time, missed work)	Cost reduction		
	Decreased provider costs	Cost reduction		
	Increased coverage of patients (access to rural areas)	Accessibility		
	Comparable effectiveness	Effectiveness		
Morland et al. (35)	Reduction in comorbidities related to PTSD (anxiety, depression)	Effectiveness		
	Access to rural population	Accessibility		
	Decreased transportation issues and time to travel	Accessibility		
	Access to rural population	Accessibility	Limited availability of physicians trained in treatment of PTSD	Physician availability
	Total cost reduction	Cost reduction		
Tuerk et al. (36)	Reported convenience	Accessibility		
	Reduction in privacy concerns	Positive patient perception		
	Creativity and flexibility of treatment (patient reported)	Positive patient perception	Limited availability of physicians trained in PTSD treatment (and capability of assisting with technology issues)	Physician availability
	Effectiveness in treatment reduction	Effectiveness	Technical difficulties with delivery method	Technology complications
	Comfort using telemedicine (avoidance of large crowds or driving long distances that induce PTSD symptoms)	Positive patient perception		
Morland et al (37)	Avoid trauma cues	Positive patient perception		
	Exceptional patient safety	Positive patient perception		
	Improved access to rural population	Accessibility	Limited access to space and high-speed internet	Access to technology
	Safety of video-teleconferencing modality	Positive patient perception	Managing logistics (escorting vets to treatment rooms for VT, sending, receiving homework assignments)	Technology complications
	Feasibility	Positive patient perception	Difficulty audiotaping sessions	Technology complications
	General confidence in treatment outcomes	Positive patient perception		
	No negative effect on dropout rate	Effectiveness		
High levels of satisfaction	Positive patient perception			
Works with ethnically and demographically diverse population of veterans	Effectiveness			

PTSD: post-traumatic stress disorder; VT: video treatment.