TELEMEDICINE CONSULTATION - CONSIDERATIONS FOR HEALTHCARE PROVIDERS

OTN has developed the following considerations for healthcare providers (HCPs) planning to use telemedicine to connect with patients in a non-traditional health care setting (examples include the work place, school, the patient’s home). These considerations also outline important information that should be taken into account before conducting a video telemedicine consultation, and address a short list of topics that are frequently top of mind for HCPs when adding patient video visits to their practice.

Physical Environment and Patient Suitability

The location of patient care, and the level of patient support immediately available, are critical factors to consider when determining the suitability of a patient for a videoconference consultation. This is particularly important for mental health patients. The following four scenarios outline what consulting HCPs who are providing care via telemedicine should consider to ensure proper care.

1. **If the Patient is supported by a Healthcare Provider (HCP) who is familiar with telemedicine:** The supporting HCP can usually assist with a physical exam and can intervene if the patient’s clinical condition worsens.

2. **If the Patient is in a telemedicine studio alone or supported by a HCP who is not familiar with telemedicine:** The patient may be required to self-demonstrate their physical issues. The consulting HCP should have contact information for an HCP in the healthcare facility who is available to them to respond rapidly if the patient needs additional urgent clinical support.

3. **If the Patient is at home (or in another non-traditional healthcare setting) alone or accompanied by a lay person:** The patient will have to self-demonstrate their physical issues. A face-to-face encounter may be more appropriate when a detailed physical exam is required. The consulting HCP should know the patient’s address and emergency response numbers in the community where the patient lives in case the patient’s condition deteriorates. The consulting HCP should also have mechanisms in place to order prescriptions, laboratory tests and diagnostic imaging when required. (6)
4. **For patients requiring mental health services or psychotherapy.** The consulting HCP should assess the patient before each session to ensure it is appropriate to use videoconference for this type of consultation (e.g., suicide risk assessment). (6) (7) (8) (12)

Before beginning any clinical activity using videoconferencing, the consulting HCP should:

- Have a backup plan for the patient's care if there is a technical failure or if the patient's clinical situation becomes unstable during the video visit. (2) (6) (7) (8) (12)
- Confirm the patient's identity.
- Confirm who else is in the room with the patient.
- Announce everyone that is in the room with the consultant.
- Ensure the patient understands how a telemedicine visit works. (10) (12)

**Use of Mobile Devices**

Consulting HCPs have the option of using a mobile device to conduct a clinical consultation. In these situations the consulting HCP should use their best judgement to ensure that the patient's clinical needs will likely be met and that the environments within which the consultation will occur are private and conducive to the delivery of care through a mobile device.

The use of mobile devices in telemedicine for unplanned consultations such as in an emergency or for on-call services may be more appropriate when a consulting HCP has an established patient-provider relationship with a suitable patient; or when no other reasonable option is available (such as computer or room-based videoconferencing).

Before beginning any clinical activity through a mobile device, the consulting HCP should:

- Consider whether the clinical needs of the patient can be met through mobile technologies.
- Be aware of their physical environment with respect to confidentiality, privacy and security measures. (11)
- Consider the use of a docking station or stand for their mobile devices so as to avoid excessive motion that would be viewed by a patient and that could cause symptoms associated with motion sickness (known commonly as simulator sickness).
General Considerations for providers using Personal Videoconferencing and Send Invite

This section highlights some of the key considerations a HCP should take into account when using Personal Videoconferencing. While this list is not exhaustive, it points out some important elements providers should be aware of. Several of the considerations are referenced for more details if needed.

1. **Licensure, standards of care, professional regulations:** In general, these are the same as for in-person care. HCPs can consult with the College of Physicians and Surgeons of Ontario for more information (1) or their own professional College.

2. **Privacy/security:** Must meet the requirements of the ‘Personal Health Information Protection Act 2004’ (PHIPA), as well as industry and professional standards (5)(11). Different jurisdictions (for example, other provinces) may have different standards and policies on issues such as privacy, record keeping and consent which must be met (also applies to consideration #9 below).

3. **Patient understanding:** Ensure the patient understands what telemedicine is and what to expect during their telemedicine visit. (10) (12)

4. **Liability coverage:** CMPA assistance is usually available for physicians as long as the patient and the consulting HCP are both within Canada during the consultation. (4)

5. **Connectivity and equipment standards:** Should be suitable for a quality video experience as outlined in OTN Personal Videoconferencing support documents. (2)

6. **Physical room set up:** Ensure the physical setting is appropriate for the encounter and permits the patient to share personal information in a reasonably private manner. Patient and provider settings should be well lit. (2)

7. **Technical issues:** Patients and consulting HCPs should be reasonably technically literate and able to troubleshoot technical issues. OTN Customer Care Center does not provide technical support directly to patients. Consulting HCPs should be able to provide basic support for technical issues that a patient using Send Invite may have. (2)

8. **Recording video:** OTN does not participate in recording clinical consults. If a
consulting HCP wishes to record the session, it is recommended that patient consent be obtained and that the consultation is recorded at both ends. (4) (5)

9. **Record keeping and consent:** In general, consent is implied when the patient verbally accepts to use telemedicine - written consent is not routinely necessary; however, consent and any related discussions with the patent should be noted in the patient’s medical record. Records must be kept to the same standard as in-person care. (1) (4) (5)

10. **Prescribing:** The consulting HCP should ensure that prescriptions are faxed to licensed pharmacies, not to patients or other healthcare providers. (9)
References

10. OTN Patient Pamphlet https://support.otn.ca/en/members/resource-library#Forms & Brochures