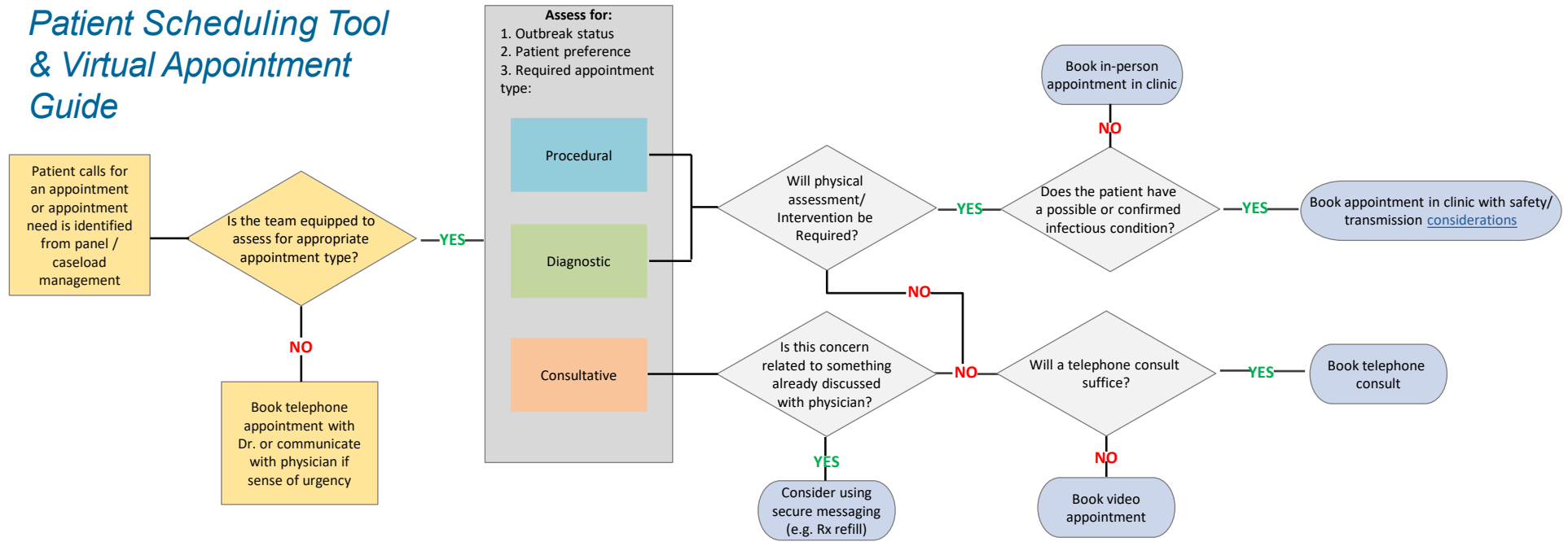


Determining the Appropriate Appointment Modality During the COVID-19 Pandemic

Patient Scheduling Tool & Virtual Appointment Guide



Questions to ask & consider to assess for required appointment type:

Safety:

- What is the current outbreak status in your community?

Patient preference:

- Note: This is more difficult to accommodate during times of high COVID-19 case numbers in your community.

Procedural:

- Are you anticipating a physical intervention will be performed by the Dr. (e.g., an urgent diagnostic biopsy) that can only be done in the clinic?

Diagnostic:

- Do you have a physical injury/ailment that you would like the Dr. to see?
- Can the Dr. examine the area appropriately over a video appointment?
- Do you anticipate the Dr. will need to take blood work or other diagnostics during your appointment (e.g., urine sample, throat swab)?
- Do you think the Dr. will need to perform a physical examination that would require you to be in the clinic (e.g., listening to lungs, taking blood pressure)?

Consultative:

- Can your concerns be met simply through a conversation with the Dr. (e.g., health questions, prescription refill, medical advice, minor/temporary problem)?

What Problems Can be Safely Assessed and Treated using Virtual Care:

The scope of virtual practice is presently limited to encounters requiring only history, gross inspection and/or data that can be gathered through cameras or common devices like glucometers, scales and blood pressure monitors. Examples include:

- assessing and treating mental health issues
- assessing and treating many skin problems
- assessing and treating urinary, sinus and minor skin infections
- sexual health care including screening and treatment for STI's and hormonal contraception
- providing travel medicine
- assessing and treating conditions monitored with home devices and/or lab tests
- reviewing lab, imaging and specialist reports
- conducting assessments that do not require palpation or auscultation
- Well child visits

Problems NOT amenable to virtual care include new/significant emergency symptoms such as acute chest pain, SOB and loss of neurologic function. Ear pain, cough, abdominal/GI symptoms, MSK injuries, most neurological symptoms, CHF and detailed physical examination beyond what can be done via video.

Note: the normal requirement for physical examination can be waived if doing so is in the patients best interest such as during disease outbreaks or when the patient has temporary limited mobility of lack of transportation.

Source: *VirtualCarePlaybook* https://www.cma.ca/sites/default/files/pdf/Virtual-Care-Playbook_mar2020_E.pdf

Virtual Appointment Guide

'Virtual appointment' is a broad term that encompasses a variety of ways healthcare providers can remotely interact with their patients. In addition to providing care to patients via telephone, physicians may use live video and secure messaging to communicate with their patients remotely.

Some examples of how Alberta physicians are practicing virtual medicine include:



The *majority* of virtual care can be successfully delivered by **phone**.

Examples:

- Chronic disease
- MSK complaints
- Infections
- Allergies
- Mental health



In some instances, having the visual component of a **video call** is preferable.

Examples:

- Hearing impaired
- Visual confirmation of overall condition (e.g., infants and elderly)
- Dermatological concerns



Occasionally, the most convenient method of care delivery is **secure messaging**.

Examples:

- Follow-up investigations
- Birth control starts
- Prescription refills or adjustments
- Dermatological concerns (if photos can be sent)

The Canadian Medical Protective Association (CMPA) provides a comprehensive [disclosure and consent form](#) that covers video, audio and messaging communication.



Phone Visit Tips

TEAM

PRE-

When booking a phone appointment:

- Confirm that patient consents to be phoned for the appointment, and enter in patient record

Confirm with patient + add to Booking Notes:

- Patient's reason(s) for booking
- Best phone number to reach the patient
- Preferred pharmacy
- Preferred lab/DI

Provide patient with 'Pre-visit Information'

Prepare for visit, as appropriate:

- Review chart and Netcare prior to visit
- Prepare for the possibility of prescriptions



PATIENT

PRE-

Pre-visit Information, please expect:

- A call from your doctor at XX:XX, +/- X minutes
- If you miss the call, further attempts will be made during the one hour window; if you're unable to connect during that time, please phone back to re-book
- An experience very similar to regular clinic appointments

Prior to the appointment, please prepare:

- A list of your questions and concerns
- Self-measurement info (as appropriate - e.g., weight, BP, glucometer readings, temperature, etc.)
- Notebook for recording notes and instructions from physician
- To have a family member available if language or hearing issues might pose a challenge

Other things to consider before your appointment:

- Privacy - do you have a quiet space?
- Would headphones or ear buds increase your privacy?
- Is your phone fully charged or can be plugged in?
- Is your ringer volume on so you won't miss the call?
- Do you have your prescriptions handy, if applicable?

PHYSICIAN

PRE-

Consider your physical workspace for phone visits:

- Privacy and minimal background noise
- Use of ear buds or headphones with a microphone
- Cell phone: keep plugged in to charger when possible
- Comfort: Standing breaks? Ergonomic positioning for listening and typing in EMR?

Prepare for visits:

- Huddle regularly with team to plan ahead and share workload
- Review Netcare/chart notes flagged by team previously
- If you're running late, engage the team for support

DURING

During the visit:

- If patient does not answer, attempt to call again following each of the next 2-3 patients
- Confirm that you're speaking with the patient
- Confirm consent for phone visit
- Consider creating 'macros' for routinely charted notes, like confirmation of consent
- Engage patient with your usual opening conversation and set the stage, for example:

'When you booked, you mentioned you were concerned about your blood sugars. Is that still the case? (yes) Anything else? (no) We'll address your blood sugars today, and if we aren't able to fully meet your needs, we may talk about other options.'

At the end of the visit:

- Summarise discussion and plan
- Clarify red flags the patient should be aware of, including when and how to access care
- Set expectations for timing of prescriptions, referrals, etc.
- Send task requests to appropriate team members, as needed
- Complete notes in patient record

POST-

After the visit:

- Act on messages/tasks from physician
- If applicable, email information (e.g., test instructions, recommended websites, etc.) to patient
- Follow up with patient, as appropriate



Preparing ahead allows for avoidance of long pauses in conversation. For example, on the phone, a patient may feel compelled to fill the silence if you're looking something up on Netcare. This can lead to time-consuming conversations that don't add value. Team can help with preparing!



Video Visit Tips

TEAM

PRE-

When booking a video appointment:

- Confirm that patient consents to connect remotely by video, and enter in patient record
- Confirm patient email to send the video link and instructions

Confirm with patient + add to Booking Notes:

- Patient's reason(s) for booking
- Best phone number to reach the patient should video connection be lost
- Preferred pharmacy
- Preferred lab/DI

Provide patient with 'Pre-visit Information'

Prepare for visit, as appropriate:

- Review chart and Netcare prior to visit
- Prepare for the possibility of prescriptions

POST-

After the visit:

- Act on messages/tasks from physician
- If applicable, send information (e.g., website) to patient
- Follow up with patient, as appropriate

PATIENT

PRE-

Pre-visit Information

- Connect to link in email 10-15 minutes prior to test microphone and camera
- Ensure camera lens is clean
- Ensure there's adequate lighting so the doctor can see you clearly
- Expect an experience very similar to regular clinic appointments
- If the physician doesn't join right on time, please wait. Contact the clinic main line after x minutes past scheduled appointment time.

Prior to the appointment, please prepare:

- A list of your questions and concerns
- Self-measurement info (as appropriate - e.g., weight, BP, glucometer readings, temperature, etc.)
- Notebook for recording notes and instructions from doctor
- To have a family member available if technology, language or hearing issues might pose a challenge

Other things to consider before your appointment:

- Privacy - are you in a quiet space?
- Would headphones or ear buds increase your privacy?
- Do you have your prescriptions handy, if applicable?
- Do you have your prescriptions handy, if applicable?

PHYSICIAN

PRE-

Consider your physical workspace for video visits:

- Privacy and minimal background noise or activity
- Use of ear buds or headphones with a microphone
- What will the patient experience visually? Where is your camera pointing? What's visible in the background?

Prepare for visits:

- Huddle regularly with team to plan ahead and share workload
- Review Netcare/chart notes flagged by team previously

DURING

During the visit:

- Confirm that you're speaking with the patient, if not previously known to you
- Confirm consent for video visit
- Explain to patient if you will be typing in the EMR during the session
- Consider creating 'macros' for routinely charted notes, like confirmation of consent
- Engage patient with your usual opening conversation and set the stage

'When you booked, you mentioned you were concerned about a rash. Is that still the case? (yes) Anything else? (no) We'll address your skin condition today, and if we aren't able to fully meet your needs, we may talk about other options.'

At the end of the visit:

- Summarise discussion and plan
- Clarify red flags the patient should be aware of
- Set expectations for timing of prescriptions, referrals, etc.
- Send task requests to appropriate team members, as needed
- Complete notes in patient record



Test out your video set-up with a friend or family member before seeing patients. For example, if you're viewing the patient on one screen, but your camera is on another, it may appear as though you're not 'looking' at the patient and therefore not fully attentive.



Secure Messaging Tips

Many EMRs offer a 'patient portal' where secure messaging between the patient and physician can occur. When setting up the patient portal, some tips to keep in mind include:

- Consider which patients to offer secure messaging to
Who is likely to read/action messages?
- Mark patients who are not comfortable with e-messaging in the EMR to ensure team is aware
- Obtain patients' signed consent for messaging
- Educate patients re. appropriate issues for secure messaging
- Set realistic expectations
For example, if physicians review messages 1x/day, inform patients that it may take up to 48 hours to receive a response
- Create 'macros' for frequently typed messages
- Create a library of frequently shared documents/ web links
- For efficiency, team can predict and anticipate what patients will need



Consider language when e-messaging. Is the terminology patient-friendly? As a rule of thumb, aim for a Grade 6 health literacy target.