

# Telemedicine Best Practice Guidelines

## Table of Contents

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1. [Preparing Patients for Telemedicine Visits](#)
2. [Provider Guidelines for Telemedicine](#)
  - [Technical & Device Requirements for Telemedicine](#)
  - [Environmental Consideration](#)
  - [Telemedicine from Home or Other Locations](#)
3. [Professionalism and Telemedicine](#)
  - [General Considerations](#)
  - [Do's and Don'ts](#)

## 1. Preparing Patients for Telemedicine Visits

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Provide patients with links to:

- [UWM Telehealth Website](#)
- [Instructions on Preparing for your Telehealth Appointment](#)

Patients should do the following to prepare for their visits:

- Be sure to be in a quiet, private, well-lighted location with reliable Internet access and a charged device
- Bandwidth can vary around their home, so have them test out best locations. Advise Patient to close other apps so there is no competition for processor time or bandwidth.
- Schedule visit when you can focus and avoid distractions
- Consider using headphones for privacy
- Device should have a forward-facing camera (smartphone, tablet, desktop or laptop)
- Flashlight and thermometer are helpful; also, blood pressure/pulse if have at home
- Bring list of questions and concerns

Considerations for scheduling and discussing telemedicine with patients:

- This may be a new option for patients, and they may have normal apprehension about how well a telemedicine visit can meet their needs.
- You should be aware of the reasons for visits that are most amenable to telemedicine and which are better addressed by an in person visit.
  - Specific guidelines regarding the types of visits most appropriate for telemedicine will vary by clinical specialty.
    - In general, the following visit types are good use cases for telemedicine:
      - Follow-up of chronic conditions such as mental health concerns, HTN, DM, obesity and COPD
      - Discussion of test results (labs, imaging)
      - Counseling about diagnostic and therapeutic options
      - New patients with skin conditions
    - In general, the following types of visits are not as good for telemedicine:
      - Abdominal pain

- Eye complaints
- Gynecologic complaints
- Any situation in which the physical exam would change your recommendation/treatment plan
- Let the patient know that if the provider determines an additional physical exam is needed, the telemedicine visit may need to be converted into a regular in-person visit and their flexibility is appreciated.
- Discuss advantages of telemedicine: convenience, less time away from work and/or family duties, ability to include caregivers, etc.

## 2. Provider Guidelines for Telemedicine

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**Technical & Device Requirements:** It is essential that you ensure you have the appropriate equipment & connectivity to successfully perform telemedicine visits.

- **Internet Speed:** Ensure that you have sufficient internet speed to support video and audio if doing telemedicine via wi-fi, or otherwise not using the UW network. Test this to ensure your connectivity is adequate. You need at least 1.2 mbps upload/download speed if using a laptop and 600 kbps if using a mobile device. Please do a speed test by going here: <https://www.speedtest.net/>.
- **Device:** If using a PC, you should have at 2GHz processor with 4GB of RAM. A mobile device should have a 1 GHz processor. Your device should have a screen that is large enough to allow you to clearly view the patient.
- **Device Set Up & Configuration:** Ideally, you would have two monitors connected to either a desktop or laptop. One screen to display video of patient, the other for the EMR.
  - If dual screens are not possible, a 21"-23" screen which would allow for both video and EMR on same screen.
  - Otherwise, a standard sized screen by itself or paired with a mobile device running video can be used. Larger screen is preferred.

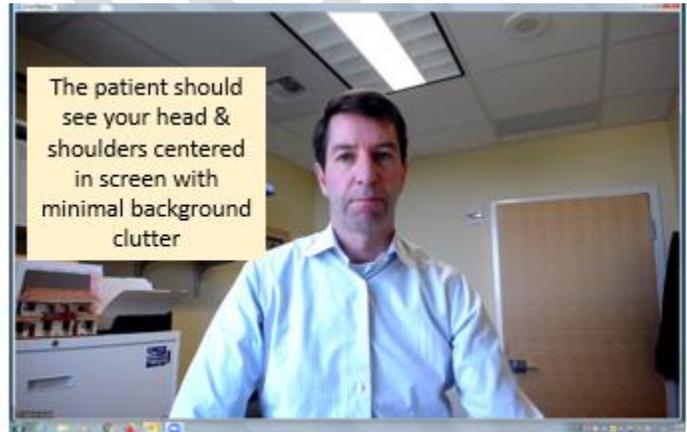
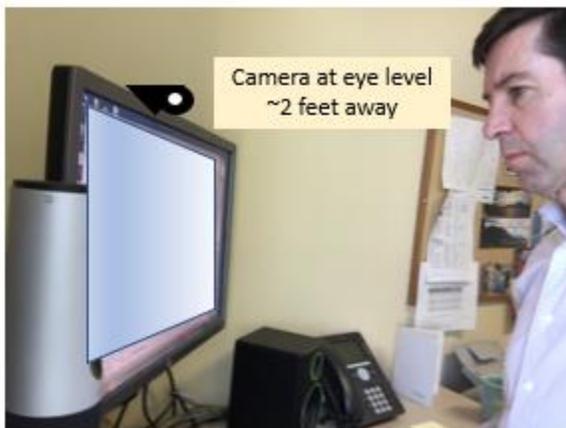
If you are performing telemedicine off-site:

- Connect via Citrix Web (<https://access.uwmedicine.org>) to access Epic (rather than remote desktop – which will not allow you to connect to the local laptop).
- Ensure that you have downloaded/installed the most current version of Zoom on your local computer (you can do this at <https://zoom.us/>); connecting via Citrix utilizes your local Zoom client. You will want to check on this periodically, as there are frequent software upgrades.

**Environmental Considerations:** It is important to consider the patient’s perspective and experience in a telemedicine visit.

- **Privacy:** You should be in a quiet, private location for the visit – ideally a private, closed office. If this is not possible, use a headset to ensure others cannot hear the patient’s side of the conversation. At the beginning of the visit, pan the camera in your space to show the patient that you’re in a private location and others are not present/listening. Ensure that others will not be walking through the area (children, pets, etc.)
- **Background:** Clear obstacles and distractions, solid colors without major distractions are best. We do not recommend “virtual” backgrounds; it is best that the patient can see that you are in a professional setting and are alone for the visit.

- **Clothing:** Solid neutral colors or light blue work best – stripes, polka dots, checkers can be distracting on video. Dress conservatively and respectfully, the same way you would for an in-office visit.
- **Lighting:** Be as well-lit as possible for improved eye contact, rapport, and trust. Aim for multiple sources of light to reduce shadows, light source directed the same as the camera is ideal but might introduce eye fatigue for you. Window light will vary throughout the day. Ask the patient to close curtains, adjust camera angle, move a lamp etc. as needed.
- **Camera placement:** Your camera should be slightly above eye level, ~2 ft away. Your initial introduction view should include your head and shoulders, while later views might include more of the body for non-verbal cues. The webcam creates a more intimate vantage point than typical: slouching, fidgeting, turning the body or face away from the camera to take notes are noticeable to the patient. Make eye contact with the camera, not the patient's face. If you need to look away to view their chart, let patient know why.
- **Background noise:** Minimize background noise to reduce distractions (i.e. no music/radio or other controllable noise in the background). Advise the patient if you'll be typing and they will hear your keyboard typing noise – explain what this is, introduce everyone within microphone range on your side, especially if out of camera view. Let the patient know if background noise on their end is keeping you from fully focusing on their care and provide suggestions for complete focus.



**Telemedicine from Home (or other non-clinic locations):** While it is possible to conduct telemedicine from home and other locations outside the clinic, all guidelines above must be met regardless of your location. Clinic leadership approval is required to do telemedicine from home or other locations.

- **If you cannot reliably conduct a telemedicine visit meeting all guidelines above from home or other off-site location, you should come to your clinic/hospital to see patients.**

## Professionalism and Telemedicine

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**General Considerations:** Telemedicine is new for most patients and providers; we are learning together. In addition to the guidelines above regarding privacy, environment and devices, consider the following:

- **Patient comfort/ability:** Patients comfort level with telemedicine will vary; we need to accommodate their tech limitations and concerns.

- **Provider confidence:** Patients are looking to you to be the “expert” and set the tone for the visit. While the practice of telemedicine and technology may be new to you, refrain from expressing doubt or anxiety to patients.
- **Conversation style & approach for understanding:** Recognizing that you do not have the full range of communication tools that you would have during an in-person interaction (body language, gestures, etc.) think about how to ensure patients are hearing and understanding you. Consider slowing your pace of speech, utilize a teach back methodology to confirm the patient’s understanding of what was discussed.
- **Patient consent:** Informed consent prior to the visit is very important and eliminates the possibility of coercion or undue influence and protects against complaints and unmet expectations. Each visit should start with a conversation explaining the risks and benefits of telemedicine; the patient should have the opportunity to ask questions and agree to continue with the telemedicine visit or opt to reschedule in person.
  - Sample script: *Before we get started, I wanted to remind you that this visit will be billed to your insurance. We will be using a HIPAA-secured zoom line, but as with any technology, there can be privacy risks. Lastly, there may be medical concerns I cannot appropriately address in a video visit. If these come up, I will help facilitate in-person care. Do you have any questions?*
- **Shared-decision making:** It is important to engage patients in shared-decision making after their assessment in telemedicine visits that involve any degree of physical assessment. There are inherent limitations to examining patients and it is important that each patient know what these are in their situation and how this might inform their follow up plan.
- **Clear guidelines/recommendations:** Recognizing the limitations in telemedicine, be very clear in your communication of recommended care plan/next steps, and document this clearly in the AVS. This is especially important if your recommendation includes in-person follow up for conditions you were not able to address fully in the telemedicine visit.

#### Do’s and Don’ts:

##### Do:

- Be punctual and considerate
- Be prepared, including chief complaint, patient concerns and review of outside records
- Be cognizant of privacy and where you are and where the patient is. If in doubt, be polite and ask if it is ok to discuss personal matters in the environment they are in.
- Ensure the patient is in a safe and appropriate environment (i.e. not driving, or otherwise multi-tasking in a way that is not safe).
- Have a clear plan for follow-up, including After Visit Summary

##### Don’t:

- Conduct a visit in a public place
- Conduct a visit while driving or otherwise occupied. Do not multitask during the visit.
- Leave the exam room/walk away from the computer if possible; consider sending a Secure Chat message to MA
- Ever record a session