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TELEMEDICINE
PROGRAM



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The Telemedicine Referral Case Process

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How does this whole thing work, anyway?

- Who decides to refer a case via telemedicine?
- What is the procedure for referring a case?
For consulting on a case?
- What kind of information does the teleconsultant require in order to staff the referral?
- Who organizes the case information, triages the case, does the scheduling, manages network connections, and facilitates the session?



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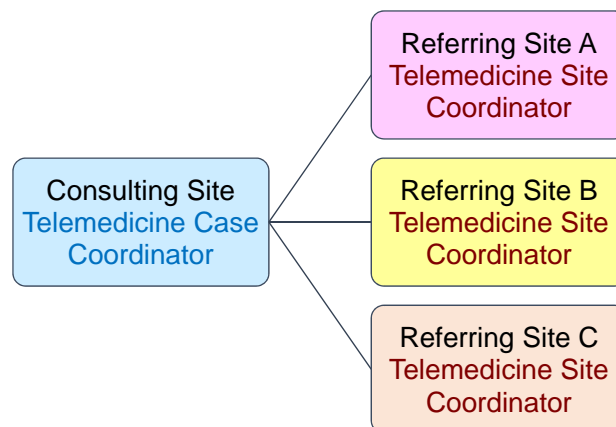
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Key Participants in the Referral Case Process

- **The Patient**
- Referring Healthcare Provider (MD, DO, PA, NP, OD, PhD)
- Telemedicine Site Coordinator (referring end)
- Telemedicine Case Coordinator (consulting end)
- Medical Director for Telemedicine (either end)
- Network Engineer(s); IT Staff
- Consulting Healthcare Specialist

Telemedicine “Case” and “Site” Coordinators serve as liaisons between participants at either end



Required Referral Case Information

- Patient Consent Form
- Patient History Form
- Patient Information Form
- Pertinent adjunct medical information (labs, progress notes, radiology/other imaging reports, digital images, outside consultation reports)



Referral Case Flow:

How referral cases are processed
using the ATP model

- The organization of every telemedicine program is unique. Thus, infrastructure, types of services, utilization of support staff, and other operational processes will vary widely, are influenced by many factors, and should be designed to facilitate work flow as efficiently as possible.
- This next section outlines just one example of such a process that has been developed specifically for staffing *non-emergent, appointment-based, multi-specialty outpatient clinical consultations* (via either real-time interactive videoconference or asynchronous store-and-forward case review).
- The process does not apply to inpatient, trauma, teleradiology, or telepathology services, for which different technologies and separate protocols are used.

- Typically, the referring healthcare provider and patient decide to request a consultation with a specialist via telemedicine format.
- The Telemedicine Site Coordinator (TSC) works with the referring healthcare provider and patient to compile and transmit the appropriate case information to the Telemedicine Case Coordinator (TCC) at the consulting site.

Telemedicine Site Coordinator with referring provider, reviewing and selecting case information for transmittance to the consulting site



Reviewing the steps in the telemedicine referral process and obtaining informed consent from the patient



Basic information sheet given to referral patients explaining the procedures, privacy, and research components of telemedicine



ARIZONA TELEMEDICINE PROGRAM
Information for Telemedicine Referral Patients

What is Telemedicine?

Telemedicine is an evaluation of your problem by a specialist at another hospital using video, audio, and computer data connections. By using telemedicine, you may not have to travel to a major health center to receive care. You will receive the benefit of a specialist at this facility. Your local health care provider will be in contact with experts who will be playing an important role in your care.

Procedures

A telemedicine session is similar to a routine medical office visit. At this session, special instruments may be used so that sounds and pictures can be sent to the specialist. There should be no discomfort from any of the specialty equipment used. Your health history will also be sent with the pictures. If it is a "live" telemedicine session, special video equipment will be used so that the specialist can see and talk to you. At the same time, you will be able to see and talk to the specialist.

Privacy

You will have the same privacy as you would in any examining room. The specialist is also in a private telemedicine room. All of your health history information and any pictures sent to the specialist will be kept confidential unless released in writing by you. Only pictures and health information pertinent to your diagnosis will be recorded and sent to the specialist. Your medical file will be treated with the same confidentiality as if it were at your local facility.

Research



PROGRAMA DE TELEMEDICINA DE ARIZONA
Información para Pacientes Enviados a Telemedicina

¿Qué es la telemedicina?


Telemedicina es la evaluación de problemas de salud por un especialista desde un hospital distante de la localidad del paciente. Para esta evaluación se utilizan conexiones de video, audio y datos computarizados. Mediante la telemedicina es posible que Ud. no tenga que viajar a uno de los principales centros de salud para recibir su atención médica. Usted tendrá aquí el beneficio de los servicios de un especialista. Su proveedor de servicios de salud estará en contacto con expertos que desempeñarán un papel importante en su atención médica.

Procedimientos

Una sesión de telemedicina es similar a una consulta regular. En esta sesión puede ser que se utilicen instrumentos especiales para poder enviarle sonidos y fotos al especialista. El equipo especializado que se utilice no le causará a Ud. ninguna incomodidad. Su historia clínica también será enviada con las fotos (o imágenes de video). Si la sesión de telemedicina es "en vivo" se usará equipo especial de televisión de modo que el especialista pueda verlo y platicar con Ud. Igualmente, Ud. podrá ver al especialista y platicarle.



Privacidad



Ud. tendrá la misma privacidad que tendría en cualquier sala de examen. El especialista estará también en una sala privada de telemedicina. Toda la información de su historia clínica al igual que las fotos enviadas al especialista serán confidenciales a menos que Ud. autorice codificar, por escrito. Únicamente las fotos y la información sobre su salud que sean pertinentes para su diagnóstico serán grabadas y enviadas al especialista. Su expediente clínico será guardado con la misma confidencialidad como si fuera archivado en el centro médico de su localidad.



PRACTICE GUIDELINES FOR DERMATOLOGY

April 28, 2016

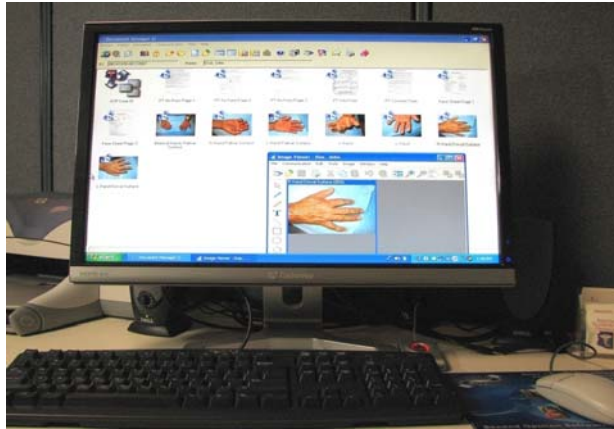
Ex: Poor diagnostic quality digital images for teledermatology referral case review ☹️



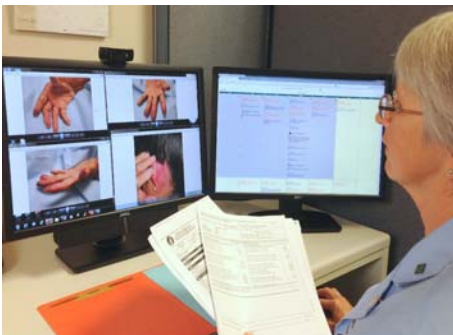
Ex: Good diagnostic quality digital images for teledermatology referral case review 😊



Preparing to transmit an electronic (store-and-forward) case file from the sending site workstation using a medical software application via a secure, encrypted network

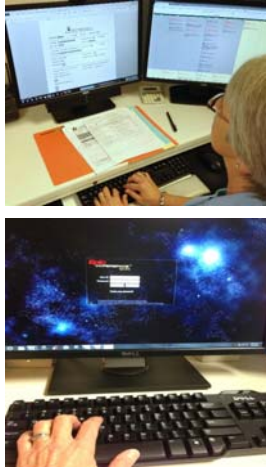


Telemedicine Case Coordinator



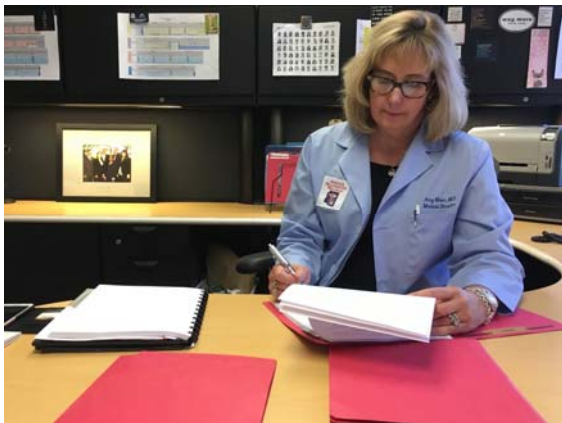
- Receives the case information and records the teleconsultation request
- Compiles and inspects demographic and clinical case information (administrative review)

Telemedicine Case Coordinator



- Registers the patient
- Begins referral case processing and documentation
- Notifies Medical Director of request

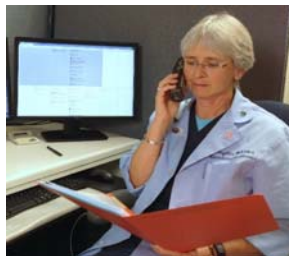
Medical Director (Consulting site)



- Reviews the chart (clinical review)
- If further information is needed, notifies the TCC who then relays the request to the TSC
- If information is complete, permits the TCC to initiate scheduling

Telemedicine Case Coordinator

- For store-and-forward requests, schedules case review with teleconsultant
- For real-time videoconferenced requests, works with TSC to coordinate appointment scheduling for standing clinics



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Using an online calendar to schedule network activities

1	2	3	4	5	6	7	8	9	10	11	12
	<p>11:30 - 12:00 The Last Advances in Aging (Zoom used as 10:00 AM Arizona Standard Time)</p> <p>11:30 - 12:00 Psych & Health (by 282P1221 - AZSD 1111 - Open Science)</p> <p>Advances in Aging Lecture Series 11:30 - 12:00 Dr. John R. Cirigliano, Director and Deputy Director of the Center for Aging Studies, Arizona State University PHD 30253 FAX 480-924-7100</p>	<p>07:00 - 08:00 SUNSHINE Clinic Youth ANDC/2017</p> <p>11:30 - 12:00 SUNSHINE Clinic Youth ANDC/2017</p> <p>Nursing Grand Rounds 11:30 - 12:00 Title, content and being trained with interdisciplinary which have additional instruction and algorithms to our colleagues. Sandy Eakin, RN, BSN, BCSC, ANP</p>	<p>08:30 - 08:30 Dora - 30 Amy Cooper (Open Enrollment Available)</p> <p>07:00 - 07:00 Sun Line Staff</p> <p>07:00 - 08:00 Sun Line Staff</p> <p>07:00 - 08:00 Sun Line Staff</p> <p>Surgey Grand Rounds 07:00 - 08:00 Dr. James W. Braxton, FRCGS, FRCS, FRCR, FRCR (Surg), FRCR (Gen Surg), FRCR (Colo Rectal Surg), FRCR (Gastro Intest Surg), FRCR (Hepatobiliary Surg), FRCR (Paediatric Surg), FRCR (Thoracic Surg), FRCR (Urology), FRCR (Vascular Surg), FRCR (Wound Care)</p> <p>11:30 - 12:00 SUNSHINE Clinic Youth ANDC/2017</p>	<p>08:30 - 11:00 SUNSHINE Clinic Youth ANDC/2017</p> <p>11:30 - 12:00 SUNSHINE Clinic Youth ANDC/2017</p> <p>Psychiatry Grand Rounds 11:30 - 12:00 Dr. James W. Braxton, FRCGS, FRCS, FRCR, FRCR (Surg), FRCR (Gen Surg), FRCR (Colo Rectal Surg), FRCR (Gastro Intest Surg), FRCR (Hepatobiliary Surg), FRCR (Paediatric Surg), FRCR (Thoracic Surg), FRCR (Urology), FRCR (Vascular Surg), FRCR (Wound Care)</p>	<p>08:30 - 11:00 SUNSHINE Clinic Youth ANDC/2017</p> <p>11:30 - 12:00 SUNSHINE Clinic Youth ANDC/2017</p> <p>Pediatric Grand Rounds 11:30 - 12:00 Dr. James W. Braxton, FRCGS, FRCS, FRCR, FRCR (Surg), FRCR (Gen Surg), FRCR (Colo Rectal Surg), FRCR (Gastro Intest Surg), FRCR (Hepatobiliary Surg), FRCR (Paediatric Surg), FRCR (Thoracic Surg), FRCR (Urology), FRCR (Vascular Surg), FRCR (Wound Care)</p>						



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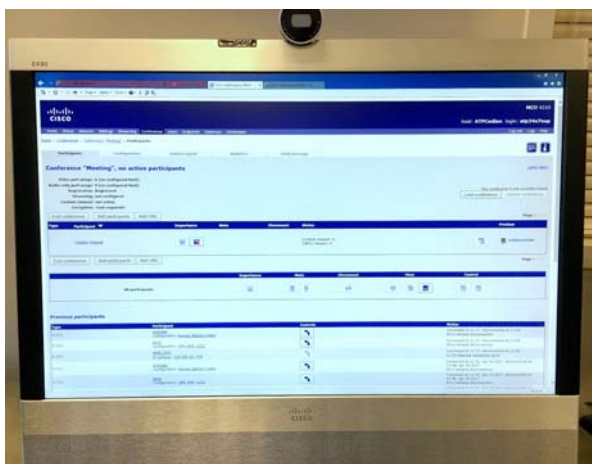


Network Engineer

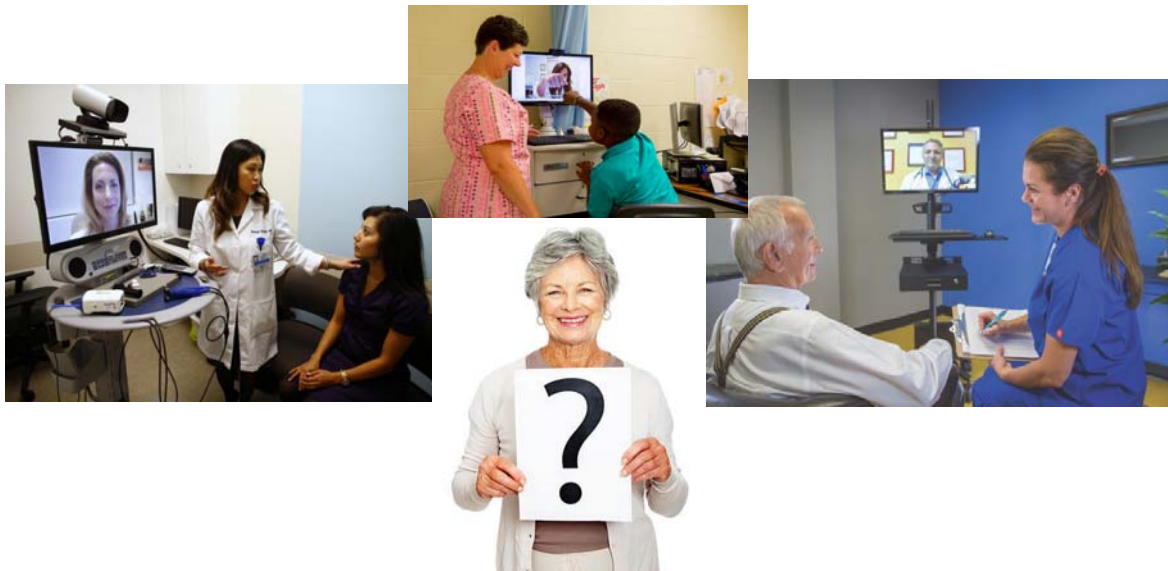
On the day of the scheduled videoconferenced clinic, sites may be dialed directly or a network engineer may enable the calls remotely.



Utilizing network applications and videoconferencing systems for monitoring events or troubleshooting connectivity issues



Telemedicine Site Coordinator



Using medical peripheral devices



Presenting the patient to the teleconsultant may require the clinical presenter to abstract information from the medical record, write orders, and to perform specialized physical examinations



Teleconsultant interfacing with presenter and patient, each in different locations



Real-time pediatric echocardiography evaluation



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One-on-one oncology genetics counseling session



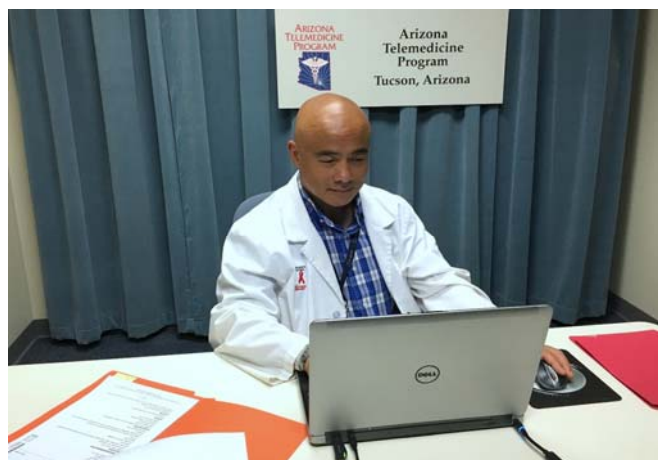
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The Telemedicine Coordinator may provide administrative and technical support during the session and is always immediately accessible if any needs or problems arise



Teleconsultant generating a progress note between patient consultation appointments



Telemedicine Case Coordinator

- Forwards finalized progress note to Telemedicine Site Coordinator for distribution to referring provider and incorporation into the local patient record
- If shared EHR systems are in place, no need for paper



Telemedicine Case Coordinator



- Completes case management documentation and finalizes patient record
- Submits patient record to Medical Director for final chart review
- Submits patient record to Evaluation Coordinator for data collection



Telemedicine Case Coordinator



- Outside hard copy records are scanned into central EHR system on the consulting end (legal custodian of records)
- Integrated EHR system handles coding/billing
- Referral case process is complete

A Few Lessons Learned

- Regularly scheduled clinics tend to be more efficient than those scheduled on an as-needed basis.
- As much as possible, try to format telemedicine clinics after routine, in-person clinics (e.g., setting up a telemedicine suite close to patient exam rooms; following registration, prior authorization and patient check-in procedures).
- Appoint and train qualified back-up personnel. Cross-coverage is a must. On-going training is important.
- Design and post a case management work flow chart as well as step-by-step protocols (standard operating procedures).
- Clinical telemedicine practice standards and guidelines released by the American Telemedicine Association are available for free download at its website, www.americantelemed.org.

- Specific responsibilities should be clearly defined and thoroughly understood by each participant in the referral case process.
- Imperative that each participant is able to follow through on assigned tasks (accountability).
- Maintain communication between all participants involved in the process, especially with regard to the status of a pending referral case. Everyone on the team should be “on the same page.”

- In this model, smoothness of the operation is heavily dependent upon the performance of the Telemedicine Coordinator at both the referring and consulting ends.
- Maintain high quality standards clinically, administratively, and technically, as all of these areas are tightly integrated in telemedicine and affect the overall quality of service.
- Remember that the goal is to ensure that patients are well served and to strive for excellence in the delivery of health care.

Thank you for your interest in attending this conference. We're glad you're here!

Please feel free to contact me if you have additional questions about this presentation:
pwebster@telemedicine.arizona.edu.

