Building Successful Telemedicine Programs/Applications Overview

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- United Healthcare Virtual Visits
- https://www.youtube.com/watch?v=gnVmHZRSOnQ
160+ Sites

• Urban & rural hospitals
• Native American healthcare
• Prisons & jails
• Community health centers
• Schools
• Distance learning affiliates
• International Sites

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Telepsychiatry

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• Teletrauma -
  University of Arizona Health Network (multiple communities)

• Telestroke
  Mayo Clinic Telestroke Network (11 rural communities)

• Teleburn
  Arizona Burn Center (Maricopa Medical Center – 12 Sites)

• eICU (electronic Intensive Care Units)
  Banner Health eICU Network (7 Banner hospitals)

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Stroke
is the third leading cause of death in the United States and the leading cause of adult disability. Approximately 795,000 strokes occur each year, and delays in diagnosis contribute to the mortality and disability associated with stroke.

TeleStroke
supports community hospitals by providing:
- 24-hour on-call stroke specialist
- Emergency department acute stroke consultation
- Bedside follow-up (depending on site needs)
- Stroke follow-up appointments (depending on site needs)

WHEN STROKE BEGINS, EVERY SECOND COUNTS
Strokes occur quickly, and every second counts. Immediate access to the expertise required to diagnose and treat stroke is crucial.

HOW TELESTROKE WORKS

COMMUNITY HOSPITAL
1. Stroke team notifies doctor, patient is evaluated
2. Emergency medical operator | Patient data transmitted
3. Patient is evaluated by the emergency department, and a Telestroke specialist consults
4. Patient is treated and discharged

TELESTROKE DOCTOR
1. 24/7 on-call telestroke specialist responds within five minutes
2. Electronic medical records are transmitted
3. Patient is evaluated by the Telestroke specialist in real-time
4. A comprehensive treatment plan is developed and communicated to the community hospital
“Telemedicine saves hundreds of thousands of dollars in travel expenses for doctors, nurses and patients each year.”

Robert Kerr
Budget Analyst, Principal
Arizona Telemedicine Program

“Care Beyond Walls and Wires is the best thing ever for me, and the best thing for my dad.”

Rita Yazzie
"Yes, telemedicine did feel weird at first. But it works. You get used to it. I think it’s the wave of the future."

Patient
Gifford Incident
Saturday, January 8, 2011

- Tucson Shooting of Rep. Gabrielle Gifford
- 6 Dead
- 12 Wounded
- Level I Trauma Center at University Medical Center in Tucson

Pre-Transfer Clinical Video Conferencing
University of Arizona and University of Texas

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Telepresence
Chronic Disease Management
Diabetes Classes to Amado via POTS (phone lines)

Sopori Elementary School
Amado

St. Elizabeth of Hungary Clinic
Tucson
Diabetes Monitoring

- 8 Megapixel Camera (60% more pixels than previous iPhone)
- New advanced optic lens to enhance shape and light
- Face detection
- 1080p Video Recording
- iOS 5
- SIRI voice activation
- Dual core chip – more power, less battery usage
Strategic Planning
Sustainability Issues

- “Meaningful use”
- Reimbursement
- Credentialing
- Interstate medical licensure
- Telecommunications costs
- Equipment obsolescence
New drivers creating need for virtual care models (ACO, PPACA, etc.)

Physicians shortages – and increased numbers of patients entering the system

Consumer demands for more convenient health care services (mHealth)

Large scale commercialization of telemedicine services

New Waves of Corporate Players

CVS Health - Minute Clinics

Walgreens - Walk-in-clinics

United Healthcare – PCP Networks
American Well
https://www.youtube.com/watch?v=sBryMAd51E

Doctor on Demand
https://www.youtube.com/watch?v=S-e4PnE3eM0

MDLive
https://www.youtube.com/watch?v=hlTo_V35u8w

ARIZONA TELEMEDICINE SERVICES

ARIZONA TELEMEDICINE PROGRAM
Thank you

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