

Section: Operational Support for Clinical Events	Number: 9.05.G.V.2
Subject: Consent to Participate in a Telemedicine Consultation	Associated Document Form Number: 9.05.F
Effective Date: June 1, 2007	Last Reviewed Date: June 1, 2009
Last Revised Date: June 1, 2009	Next Review Date: June 1, 2014

PURPOSE

The issue of consent has been at the forefront of the telemedicine industry since its inception. **Informed consent, in some form, is considered as a requirement for telemedicine, and is regarded as a separate process from consent for treatment (CST, Health Canada, 2005).** Organizations participating in telemedicine must be aware of and ensure compliance with relevant legislation or regulations that pertain to decision making and consent; and are encouraged to consult legal counsel, relevant professional licensing and regulatory bodies at their discretion (NIFTE, 2003). Provision of consent may be implied or expressed however we suggest express verbal consent be obtained for the purpose of participation in a clinical telemedicine encounter. Essential to this process is the demonstration of clear, comprehensive documentation of the informed consent discussion (*Health Care Consent Act, College of Physicians and Surgeons, CNO, 2005, Garabe, Gordon, 2003*) The consent process, properly completed and documented contributes successfully to enhancement of patient autonomy and integrity.

Informed consent (IC) – the principle of respect for persons with the right to knowledge and control over their participation and is underpinned by three basic principles of bioethics; non malfeasance, beneficence and autonomy (*Galpottae, P. Norris, A. 2005*). Informed consent is not just a form for signature but rather a documented process which in turn supports the protection of patient autonomy and promotes meaningful decision making.

This guideline has been developed to support members in the development of a consent process for participation in a clinical telemedicine encounter at their site. This guideline is not intended to substitute for the knowledge skills and judgment on the part of the involved practitioners nor does it supersede policies, procedures and guidelines as published by relevant regulatory bodies, professional associations and or insurers.

This guideline does not apply to consent for treatment; consent for treatment, takes place between the person offering this service, the health care provider (HCP) and the client receiving care and/or their substitute decision maker.

This guideline does not apply to consent for sharing of personal health information. Please refer to the OTN privacy policies or contact the privacy officer at OTN for further information.

It is recognized that there are circumstances where expressed written consent may be required and is considered beyond the scope of this guideline.

- Consent to video tape clinical consultation
- Emergency applications for telemedicine
- Certain Mental Health consultations
- Robotic invasive treatment.

GUIDELINE

A general description of the informed consent (IC) process will be discussed and recommended suggestions provided for application to clinical telemedicine consultations.

Documentation tools/templates have been developed for member sites to use for reference. Obtaining informed consent for a clinical telemedicine consultation may occur at more than one point of contact for a client receiving clinical telemedicine services. This relationship is demonstrated in Figure 1 (OTN consent process); consent may be obtained at point of referral for a clinical telemedicine encounter i.e. from the referring physician. As well, expressed verbal consent is also sought at the time of the clinical telemedicine encounter.

Critical elements of the consent process include the explanation given to the patient and the dialogue between the HCP and the patient. Please refer to the 'Telemedicine Consent Information Checklist' for a comprehensive list of specific examples of information requirements.

REFERENCES

College of Physicians and Surgeons of Ontario (2006) Consent to Treatment, retrieved December 2006 from <http://www.cpso.on.ca/Policies/consent.htm>

College of Nurses of Ontario (2005). Consent Practice Guideline. Retrieved December 2006 from http://www.cno.org/docs/policy/41020_consent.pdf

Donahue, M. (2006) Regulating Telehealth in Ontario- Next steps in the Transformation Agenda. (2005-06)6 Telehealth Law

Galpottage, P, Norris, A. (2005). Patient consent principles and guidelines for e-consent; a New Zealand perspective. Health Informatics Journal, Vol 11(1): 5-18 <http://www.sagepublications.com>

Health Care Consent Act (1996) Retrieved December 2006 from http://www.e-laws.gov.on.ca/DBLaws/Statutes/English/96h02_e.htm

National Initiative for Telehealth Guidelines (2003). National Initiative for Telehealth (NIFTE) Framework of Guidelines Ottawa: NIFTE

Parker Taillon, D., & Associates. (2005) Background Paper on the Current Status of Consent in Telehealth. Health Canada

RELATED DOCUMENTS

Subject	Number
Telemedicine Consent Information Checklist	
Telemedicine Consent Checklist Rational	
OTN Membership Agreement	
Referring Physician Agreement	
OTN Privacy Policy	18.01.P