How a leading Toronto cardiac surgeon uses Telemedicine to improve the experience for northern patients.

The older you are, the more you’re struck by what technology can do. The younger you are, the more you see that same technology as simply “the way things are done.”

For Dr. Maral Ouzounian, newly-appointed Cardiac Surgeon and Surgical Scientist at the Peter Munk Cardiac Centre in Toronto and Clinician Scientist with the Toronto Aortic Laboratory, telemedicine is just how things are done. “At Toronto General, many doctors use it,” Dr. Ouzounian says matter-of-factly, “When I first had the opportunity to see a patient remotely I investigated how feasible it was, and found it easy to set up and implement. So I just started using it.”

In practice since July of 2013 – and based in Toronto rather than northern Ontario – Dr. Ouzounian’s early career experience with telemedicine provides a unique perspective. Adopting its usage was less of a matter of adapting her process to include it, but more about building a process around one of the many useful tools at her disposal. Much of her decision to do that comes from being a surgeon at a tertiary care facility that sees northern patients referred to her from primary care facilities across Ontario.

“I started using it out of patient need,” she says, citing the amount of travel time and undue burden on patients who travel to southern Ontario for treatment. “Patients would much rather have services rendered at home. You can’t avoid them having to make the trip for their surgery, but you can minimize the burden by doing other visits through telemedicine.”

Surgeons are succeeding with telemedicine.

In the past 4 years, 400 surgeons used OTN for 21,000 patient visits.¹

21,000 patient visits

400 surgeons

¹Based on TSM scheduled events from fiscal 2009/10 through 2013/14.

Like many surgeons, Dr. Ouzounian often uses telemedicine for her initial patient consults, as well as for follow-up visits. This makes the technical requirements simple, as the telemedicine visit is entirely conversational, and requires no accommodations for physical exams. “I’m just speaking with the patients,” Dr. Ouzounian explains, “I make sure I’ve reviewed the films and CT scans and echoes beforehand.”

otnhub.ca/gothedistance
Dr. Ouzounian finds that her patients’ comfort level with telemedicine is, like hers, often directly related to their age and experience with technology like the internet and social media. She sees a slight difference between older and younger patients when it comes to using telemedicine. “There’s a bit of a lack of intimacy when you meet someone via telemedicine for the very first time, and you can’t shake their hand,” she explains, referring to patients in their 70s or 80s who aren’t as familiar or comfortable with platforms like Skype in their everyday lives. “But after a bit of time, there’s no difference. And follow-ups are even easier.” She finds older patients benefit from having family members with them when they see her by telemedicine, to help them negotiate the interaction.

Those challenges are nothing compared to the personal and financial inconveniences of having to travel to southern Ontario for appointments that are easy to accomplish on camera. “The patients I’ve used it with have all been quite grateful for not having to travel,” she says, making it clear she’s already heard plenty of stories about the difficulties northern Ontario patients face. “It’s everything. Time away from work, the cost of travel. And it’s exhausting for someone who might not be in the best of health.” Comparatively, telemedicine has proven to be easy and convenient for her patients as well as herself. “It makes life a lot easier for patients,” she maintains. “There’s really no downside.”

For her part, Dr. Ouzounian finds scheduling telemedicine appointments an efficient solution to seeing patients. “When I’m running a clinic, if I have a bunch of telemedicine patients, I’ll line them up in a row,” she explains, which allows her to be efficient with both her time and the facility’s resources.

The more our discussion continues, the more apparent that telemedicine is, for many young doctors, barely worth singling out as a distinctive aspect of the care they provide. “It’s a natural extension of what we do,” Dr. Ouzounian says simply, “A way to provide good care to people who don’t absolutely need to travel.”

“No biggie. Nobody wants to come to Toronto just for an appointment,” she says with a wry smile, acknowledging the perspective she’s heard plenty of times from her northern Ontario patients. “And you can quote me on that.”