About this Guide
The purpose of this Guide is to provide support for Telemedicine Coordinators (TMC) as they proceed with training through OTN’s asynchronous and synchronous training programs. This Guide is for reference only and should not be used in lieu of training.

Modules Related to this Guide
- Clinical Telemedicine Certification
- Physician Consultations

Learning Objectives
After completing OTN’s Clinical Consultation Module, this Guide will serve as a reference so that you can:
- Describe a site’s responsibilities throughout (before, during and after) a clinical consultation via telemedicine.
- Explain to others proper technique for facilitating a telemedicine clinical consultation.
- Explain how to arrange and schedule an initial clinical consultation and follow-up(s).
- Identify the key activities associated with preparing the site, patient and consultant for a clinical consultation via telemedicine.
- Connect a consultation

Links to Website
Please note that references and links to OTN’s website (otn.ca) are included throughout this document.
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Part 1: Pre-Consultation

1.1 Arranging a Consultation

The first step in a telemedicine event is the arranging of the virtual consultation. This activity is typically coordinated between the referring practitioner or their delegate and the consulting physician. The TMC will be contacted by a physician or OTN’s Contact Centre to arrange the consult using telemedicine.

**Identifying an appropriate consultant:** For an initial consultation, the process generally begins with a request from a practitioner to refer a patient to a consulting physician or allied health professional via telemedicine.

- When the referring practitioner knows to which consultant s/he would like to refer the patient, the patient site TMC is expected to work with the consulting-site to arrange a date and time.
- If a referring physician does not know who to refer a patient too, they should be directed to OTN’s Telemedicine Directory.

Click here to access an OTN Clinical Scheduling Form.

**Organize pre-consultation logistics:** The referring practitioner is generally responsible for organizing any additional pre-consultation information or tests requested by the consultant (e.g., patient’s previous health records, diagnostic images, lab test results).

The TMC/ Clinician ensure that organizational policies regarding the release of personal health information are observed. Consult your organization’s clinical protocols and Personal Health Information Protection Act (PHIPA) Guidelines for additional information on these matters.

1.2 Scheduling a Consultation

- All events must be scheduled with OTN using the Ministry of Health and Long-Term Care (MOHLTC) reporting metrics.
- OTN offers Members two ways of scheduling their clinical events:
  » through Ncompass (OTN’s scheduling application)
  » through the OTN Contact Centre

- Your OTN Regional Manager will discuss and recommend appropriate scheduling options for your site/program.

1.3 Preparing for a Consultation

On the day of the consultation, the TMC must ensure that telemedicine exam room and participants are appropriately prepared.

**Check the videoconference system:** The TMC should arrive in the telemedicine clinic at least 20 minutes prior to the session to ensure:

- That the system is properly connected and ready for the videoconference.
- That all camera presets are established and that all necessary peripheral devices are properly connected to the videoconference system and functioning.
- That equipment Quick Reference Guides (QRGs) are available as required.
Ensure necessary forms are available: The TMC must ensure that all necessary forms associated with the consultation are available before the session begins, including the Telemedicine Clinical Protocol (if applicable).

Other forms may include:
- OTN privacy information;
- requisition forms;
- session documentation forms;
- telephone/fax numbers for local pharmacies;
- your own fax number;
- consent checklist;
- prescription pads;
- equipment quick reference guides (QRGs); and
- referral forms.

In the event that any technical difficulties occur during the event, the TMC should have the following information available:
- OTN Service Desk contact number: 1-866-454-OTN1 (6861).
- The consultation TSM/event ID number.
- Your site and system number.

Prepare the room: The objective is to create a virtual environment which best mimics a standard face-to-face consultation environment. Some telemedicine specifics to consider are:
- Appropriate clinic space (i.e., not a boardroom).
- Medical equipment that may need to be brought in to the telemedicine space.
- Arranging the furniture and equipment to ensure proper views of the patient while ensuring patient privacy.
- Adjusting the lighting to ensure good quality video (avoid window glare).
- Hanging a “session in progress” sign on the outside of the door to the room.
- Deferring any telephone calls and pages for the duration of the session.

Register the patient: OTN recommends that all patients be registered for telemedicine consults at both the consulting and patient sites. Members are encouraged to follow their existing organizational registration or patient check-in processes, and to identify the patient consultation as a telemedicine visit.

Prepare the Patient (if at your site)
- The patient should arrive 15-30 minutes prior to the appointment in order to register and prepare for the consult.
- Where appropriate, ask the patient to change into a hospital gown.
- Depending on the telemedicine protocol, clinical interventions may be required prior to the consultation.

Development of clinical protocols: TMCs at a consulting site are encouraged to work with the consultants to develop specific telemedicine clinical protocols or procedures.
- These protocols establish the consultant’s requirements for the visit and should be designed to help all TMCs understand the process and requirements for specific patient examinations with that consultant.
• Your OTN Regional Manager is available to assist with the development of these protocols. Templates and guidelines are available in the Guidelines section of the Member Resource Library on the OTN website.

1.4  Videoconference Process, Privacy and Consent

Patient Site: Before the consultation begins, there are a few things TMCs should discuss with the patient and consultant.

• **Explain the telemedicine process:** The patient site TMC will explain the telemedicine process to the patient and how it may differ from a standard face-to-face consultation.

• **Obtain consent from the patient:** Using OTN’s “Consent to Participate in a Telemedicine Consultation Checklist”, the patient site TMC obtains informed consent from the patient to participate in a telemedicine consultation. If your organization uses a different consent process, you should follow that process.

> The telemedicine consent process should also be outlined in your own organization’s privacy policies.

The consent checklist, patient brochure and “Clinical Consultation Etiquette” are found in the Member Resource Library on the OTN website.

**Explain the consultation process:** The consultant site TMC should explain the consultation process to the consultant and how it may differ from a standard face-to-face consultation. The explanation must include that:

• There is a slight delay in sending and receiving video and audio signals.

• The microphone is designed to pick up sound from around the room so moving it or obstructing it with papers interferes with sound quality.

• Anyone in the room who may be off camera needs to be introduced.

• The patient has provided informed consent to participate in the telemedicine consultation and has been made aware of privacy provisions.
Part 2: During the Consultation

2.1 Connecting the Participating Sites

There are two methods with which to connect the participating sites:

1) The consultant will initiate the call to the patient site, unless an alternate arrangement has been agreed.
2) The system will automatically dial, starting and ending at the pre-scheduled times.

Urgent or emergent connections can be made but are not typically pre-scheduled. However these types of events MUST be scheduled either at the time of the event or retroactively, either through Ncompass or the OTN Contact Centre. Discuss the best process for your emergent program with your OTN Regional Manager.

2.2 Beginning the Session

At both sites

Introduce everyone: All participants at the patient and consultant sites should introduce themselves and anyone else in the room. Pan the camera or zoom out to ensure that the remote site can see everyone when they are introduced.

At the Patient Site

Present the patient and facilitate the consultation: There are several roles that the patient site TMC must fulfill during the consultation.

• When a referring practitioner attends the consultation with the patient, s/he may be asked to assist with the clinical examination on behalf of the consultant.
• A TMC should not engage in activity beyond their scope of practice.
• If a TMC does not have the appropriate clinical background to facilitate a consultation, s/he should arrange for a health care professional with the appropriate skill set to help during the consultation.

At the Consultant Site

Facilitate and direct the consultation: The consultant site will have several roles during the consultation.

The TMC may attend the consultation with the consultant depending on the support the consultant requires.

2.3 Discussing Follow-up with Patient

At both sites

Identify future testing and follow-ups: Before the session is concluded, all parties should be made aware of their role in the follow-up process.

The consultant should communicate to the patient whether there is a need for a follow-up appointment (either via telemedicine or face-to-face) and arrange this using standard processes.
Part 3: After the Consultation

3.1 Scheduling a Follow-up Telemedicine Consultation

If the consultant has requested a follow-up by telemedicine, this should be scheduled through Ncompass or OTN’s Contact Centre.

3.2 Follow-up Activities

The following are some potential follow-up activities that may be required after a consultation. Please ensure that you follow your own organizational clinical protocols and documentation practices.

Patient Site

Patient Site responsibilities: The responsibilities of the patient-site (TMC and referring practitioner) will depend on the outcome of the event. The TMC may be required to assist the consultant with coordinating post-consultation activities.

At the Consultant Site

Consultant site responsibilities: The responsibilities of the consultant-site (TMC and consultant) will depend on the outcome of the event and may include recommendations for patients to have laboratory or diagnostic tests.

Faxing prescriptions: Both the Ontario College of Pharmacists (OCP) and the College of Physicians and Surgeons of Ontario (CoPSO) have policies regarding the faxing of prescriptions. OTN recommends that consultants comply with their respective policies.

OTN’s “Guidelines for Faxing Prescriptions”, can be found in the Guidelines section of the Members Resource Library of the OTN website.

3.3 Documentation and Reporting

The TMC must ensure that proper documentation and reporting protocols are followed.

At both sites

Patient records: The TMC should document the consultation consistent with their organization’s policies and processes as well as their professional college’s guidelines/policies.

Reporting unscheduled events: For unscheduled, point-to-point clinical events, sites must report activity through Ncompass or OTN’s Contact Centre.

Documentation and storage of patient records: Consultations should be documented as part of a patient record according to the same guidelines and standards as traditional face-to-face patient visits. OTN recommends that all consultations be documented at both the patient and consultant sites consistent with your professional college’s guidelines/policies. Contact your OTN Regional Manager for further information.
Clinics - Essential Things to Consider

*This is not an exhaustive list. Please speak with your OTN Regional Manager prior to initiating new clinics.

**Space**: The clinical space and equipment available must match the requirements of the consultant; and must be large enough to accommodate all participants.

**Timing**: Add time between patient appointments to complete protocol requirements.

**Human Resources**: A regulated health care provider is required; however in the absence of a TMC with a clinical background, additional support may be required and/or recommended.

**Privacy**: Ensure optimal patient privacy.

**Scheduling**: A number of scheduling options are available. Please discuss which option(s) are appropriate for your clinics with your Regional Manager.
<table>
<thead>
<tr>
<th>Clinical Exams</th>
<th>Tip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equipment - AMD Exam</td>
<td>Remember to unfreeze an image on the patient exam camera at the end</td>
</tr>
<tr>
<td></td>
<td>of the consult.</td>
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<td></td>
<td>When looking at large areas of the body before freezing an image,</td>
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<td></td>
<td>move the camera slowly so as to optimize image transfer.</td>
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<td></td>
<td>Use “REF” button on the patient exam camera when looking at shiny or</td>
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<tr>
<td></td>
<td>wet surfaces (e.g. bald heads, serous wounds).</td>
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<tr>
<td></td>
<td>Using tripod for patient exam camera for edema and pedal assessments.</td>
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<tr>
<td></td>
<td>Use a tripod when using the patient exam camera, particularly when</td>
</tr>
<tr>
<td></td>
<td>using the 50x magnification lens.</td>
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<tr>
<td>Equipment - Laptop</td>
<td>When using the laptop in a clinical environment:</td>
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<tr>
<td></td>
<td>1. Test laptop to see image/presentation on the videoconferencing</td>
</tr>
<tr>
<td></td>
<td>system.</td>
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<tr>
<td></td>
<td>2. Advance films and CT images slowly to optimize image transfer.</td>
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<tr>
<td>Equipment - Presets</td>
<td>Set up peripherals as pre-sets on the videoconferencing equipment</td>
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<td></td>
<td>(Polycom).</td>
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<tr>
<td></td>
<td>Camera needs preset of full body view (assessment of dyskinesias).</td>
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<tr>
<td>Equipment - Steth</td>
<td>Mute microphone at patient site when using the digital stethoscope.</td>
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<td></td>
<td>Participants at patient site should remain silent when using the</td>
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<tr>
<td></td>
<td>stethoscope so as not to transmit noise.</td>
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<tr>
<td>Equipment - Telepresence</td>
<td>Remember to look at the camera not the monitor to create optimum</td>
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<tr>
<td></td>
<td>eye contact.</td>
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<tr>
<td>Resources - Training</td>
<td>Staff are trained to use telemedicine equipment prior to the</td>
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<tr>
<td></td>
<td>consultation.</td>
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<tr>
<td>Setup - Privacy</td>
<td>Remember to hang a sign on the door indicating telemedicine session</td>
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<td></td>
<td>in progress.</td>
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<td></td>
<td>Remember privacy settings for the v/c equipment in between patients.</td>
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<td></td>
<td>Assess what can be heard outside the clinical space. Mitigate what</td>
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<td></td>
<td>can be heard by using a radio, padded doors, white noise machine.</td>
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<td></td>
<td>Remember to disconnect mobile systems in multipurpose clinical</td>
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<tr>
<td></td>
<td>spaces.</td>
</tr>
<tr>
<td>Setup - Microphone</td>
<td>Make sure to turn off both monitor and codec.</td>
</tr>
<tr>
<td>Setup - Patient Exam</td>
<td>Use cloth gowns for stethoscope exams, gowns on backwards.</td>
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<tr>
<td></td>
<td>Have blanket/gown draped over chair, behind the limbs for patients</td>
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<td></td>
<td>to sit on when assessing lower extremities.</td>
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<td></td>
<td>Blue pads are good backdrop for skin assessments.</td>
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<td></td>
<td>For patients with movement disorders, seat in chairs without wheels</td>
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<tr>
<td></td>
<td>and with arms.</td>
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<td></td>
<td>Sputum can be best viewed on a blue pad.</td>
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<tr>
<td>Setup - Resources</td>
<td>Review the protocol prior to the consultation.</td>
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<tr>
<td></td>
<td>Staff are trained to use telemedicine equipment prior to the</td>
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<td></td>
<td>consultation.</td>
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<td></td>
<td>Ensure proper supplies and resources are in the room.</td>
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<tr>
<td>Setup - Stretcher</td>
<td>No paper on the exam table.</td>
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<tr>
<td></td>
<td>Stretcher needs to be available for cardiology assessments.</td>
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</tbody>
</table>