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## Telemedicine/Telepharmacy: Tips for Connecting With Patients

Telehealth (includes telemedicine and telepharmacy) is commonly used, especially with rural or underserved patients, or during the COVID-19 pandemic. Examples of telehealth methods are e-visits (e.g., video calls), telephone calls, text messaging, and emails.<sup>1</sup> Use these tips as you practice telehealth.

### ***Plan Ahead***

- Ensure patients have home monitoring tools (e.g., blood pressure cuff, peak flow meter, glucometer).
- Do a test e-visit to trouble shoot any technology issues.<sup>3</sup> Build time into your schedule for technology issues, especially at first. Visits may take a little bit longer until everyone gets used to the process.<sup>5</sup>
- Ask patients to plan to use a quiet location without distractions for visits (e.g., not while driving).<sup>5</sup>
- It may be helpful for some patients to have someone with them during e-visits, especially if they may have difficulty understanding or remembering things discussed during the visit.
- If using your personal phone, dial \*67 before the phone number to block your number from caller ID.

### ***Be Efficient***

- Involve team members. For example, medical assistants, nurses, or pharmacy techs can help with things like coordinating appointments, triaging visit types, documenting patient weights or home blood pressure or glucose readings, reviewing med lists, trouble shooting technology issues, etc.
- Use tools or checklists to make sure you have covered everything. For example, a guide for virtual med histories and discharge education can be found at <https://www.ismp-canada.org/download/safetyBulletins/2020/ISMPCSB2020-i2-VirtualBPMHDischargeEducation.pdf>.

### ***Provide Good “Webside” Manner<sup>3,5</sup>***

- Keep the camera at eye level and look directly at the camera for direct eye contact.
- Movements are magnified on camera. Sit still, avoid distractions, and focus on the visit.
- Make sure patients can see you. Lighting should come from in front of you, NOT from behind.
- Limit background noise and distractions (e.g., work in a private area, close the door).
- With phone encounters, let patients “hear” your smile. Request detailed verbal information if you can't see the patient (e.g., “tell me the steps you take to use the purple inhaler”). Feel comfortable with silence while the patient absorbs information, or while you document or gather your thoughts.

### ***Document Visits and Limit Errors***

- Follow policies and procedures to document telehealth visits. These may include things like:<sup>4</sup>
  - the method of communication. (Note that reimbursement may vary with visit type.)
  - where you are and where the patient is during the visit (e.g., home, office, other).
  - start and stop times for each visit.
- Use the teach-back method and document patient understanding of the “take home message” from the visit (e.g., instructions for new med, when to check blood sugars, what to do if not improving).<sup>5</sup> Can also send an after-visit summary to the patient.
- When calling in verbal Rxs, spell all names (prescriber, patient, med). When receiving verbal Rxs, read back the order for verification. Speak clearly and loudly if needed, especially if wearing a mask.

### ***Protect Patient Privacy During Telehealth Visits***

- Start telehealth visits by confirming the patient's identity and obtaining consent.<sup>6</sup>
- Avoid doing e-visits in rooms with windows positioned to view your monitor (or cover windows).<sup>6</sup>
- Put a sign on the door for privacy to prevent others from entering the room during an e-visit.<sup>6</sup>
- In the U.S., healthcare providers will not be penalized for HIPAA violations that occur in the good faith provision of telehealth during the COVID-19 nationwide public health emergency.<sup>2</sup>

*More . . .*

*Users of this resource are cautioned to use their own professional judgment and consult any other necessary or appropriate sources prior to making clinical judgments based on the content of this document. Our editors have researched the information with input from experts, government agencies, and national organizations. Information and internet links in this article were current as of the date of publication.*

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