Purpose: To provide guidelines for the use of Telemedicine for patient consultation, diagnosis and/or treatment.

PRIVILEGING

1. Physicians requesting to use Telemedicine will be credentialed according to the Medical Staff By-laws, policies and procedures.
2. Allied Health Practitioners identified in section 1842(b)(18)(C) of the Social Security Act requesting to use Telemedicine will be credentialed according to the Medical Staff By-laws and Allied Health Practitioners policies and procedures.

CONFIDENTIALITY/PRIVACY

1. All reasonable efforts will be made to maintain patient confidentiality.
2. The patient record will be handled according to established medical records policies.
3. The consultation room should be set up to promote visual and auditory privacy.

MEDICAL RECORD

1. A medical record will be created on all telemedicine patients.
2. Patients who presents to use the telemedicine system for consultation with a healthcare provider at another location will have an outpatient sheet created reflecting a telemedicine consultation. This sheet will be used to document elements of the patient’s visit such as the following:
   a. name of consulting healthcare provider
   b. any procedures/assessments completed by the facility staff. i.e. vital signs, use of the exam camera
   c. any pictures obtained and the appropriate consent form
   d. any information received from other facilities regarding patients
   e. any verbal orders
   f. members present in the room during the consult
3. A Telemedicine Consent form will be signed by the patient or legal representative prior to the use of telemedicine and will be added to the medical record.
4. Consultations/procedures will not be video recorded except for the following
   a. cases of possible abuse (refer to state law)
   b. special request by the healthcare provider will be considered on an individual bases and determination made by the impact on the quality of patient care.
   1. If a consult is to be videotaped, a consent for videotaping will be obtained prior to the event. When the tapes are used for research and/or education all patient identifiers will be hidden or removed.
5. A patient medical record created from a telemedicine consults will be stored in the medical records department.
6. Medical Record’s policies for the release of patient information applies to all telemedicine records.

INFORMED CONSENT
1. The patient will be informed of the risk, alternatives and benefits of a telemedicine consult.
2. A Telemedicine Consent form will be signed prior to the first consult and according to the facility’s policy
3. A copy of the Telemedicine consent for will be faxed to the consulting physician for inclusion in their medical record

PATIENT RIGHTS
1. The telemedicine staff will comply with the facility’s policies on patient rights.
2. The patient has a right to refuse a consultation via telemedicine.
3. The patient has the right to stop participating in a telemedicine consultation at any time.

INFECTION CONTROL
1. Equipment used for a telemedicine consultation will be cleaned according to the facility’s infection control policies

EQUIPMENT SAFETY
1. Telemedicine equipment used for patient care will be checked according to the facility’s preventative maintenance plan.
2. Staff using telemedicine equipment will comply with the safety policies of the facility.
3. In the event of a mechanical failure of telemedicine equipment, an alternative system/site would be utilized. If no other systems are available, functioning or appropriate, or if there is a network transmission failure, the attending healthcare provider will be contacted. The attending health care provider will determine the appropriate course of action for the patient

PHOTOGRAPHS/VIDEOTAPING
1. Videorecording of patient consultations is not recommended. The consultations are to be considered the same as if the patient went to the consulting healthcare provider’s office.
2. A written consent needs to be completed prior to the taking of any photographs or videotaping to document patient care.
3. Written consent needs to be completed prior to the taking of any photographs or videotaping for research, teaching purposes or public relations issues.
4. Exceptions to this would be as governed by State or Federal laws such as in cases of child abuse.

STANDARD FOR MEDICAL CONSULTS
1. All medical consults will be held at a quality of service bandwidth of a minimum of 384.
2. If for some reason a quality of service 384 cannot be obtained, and IP call is placed, the healthcare provider will document any quality of the video issues occurring during the consult.
3. When a bandwidth lower the 384 is used, the reason will be documented.

CONTINUUM OF CARE
1. Discharge instructions will be provided to all telemedicine consultation as given by the consulting physician.
2. Follow-up care such as diagnostic testing will be scheduled as appropriate.
3. If a patient fails to present for a consultation, the referring physician will be notified.

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