

Telemedicine 101

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Disclosures

I am biased towards the fact that telemedicine is non inferior to in person visits at least in my specialty for epilepsy.

We give advice and start meds on patients that we have not seen as on call physicians/ all the time

We all agree that there are limitations to exam but lets think a bit here with different scenarios....epilepsy/ headache/ movement disorder/ learning disorder/ dev delay/ neuromuscular disorders/ googlies like back pain/ refusal to walk..

It is important to note that telemedicine DOES NOT EXCLUDE an in person visit. We expect that once we see a new patient if needed the patient can be brought back in for inperson visit in 3-6 months

My charge

- o How have things changed at your clinic since the COVID-19 outbreak?
- o How can parents of children with rare epilepsies coordinate care through telehealth with your clinic? What does it look like and how does it work?
- o When is it appropriate to bring a child to the clinic? What precautions should be taken?

How have things changed at your clinic since the COVID-19 outbreak?

Everyone is using home based telemedicine since March 11th 2020

We were already using clinic-based telemedicine and some home based telemedicine prior to COVID 19

We are not having to worry about insurance preapproval any more

Patients have always loved it- some physicians used to be reluctant, but we have new converts!

Doing 90-100 telemedicine visits per day

Change to clinics from MD standpoint

- Need to have license in the state the patient is in. Difficult to see cross state patients .
- CMS changing laws very rapidly.
- DEA has changed rules about seeing new/ follow up patients through telemedicine and we can also prescribe controlled substances now for a new patient

How can parents of children with rare epilepsies coordinate care through telehealth with your clinic?

Parents call the same scheduling number that they always have- sign consent for telemedicine.

There is no longer the stress about copay/ non covered services

We have medical assistants/ registered nurses/ IT folks do a tech check and walk them through .

Handy numbers as applicable /names/ tools/ tricks

Telemedicine uses various platforms some embedded in Epic/Electronic Medical Record:

- Vidyo
- Zoom
- Skype
- Apple facetime
- Google hangout

Requirements: need to be able to stream Netflix- 4G preferable

Will use your cellular data/ WiFi

Know the numbers to the IT department

Tech check to make sure your audio works

What does it look like and how does it work?

Note that the patient needs to be present for visit- **Use home videos , be prepared to help the physician.**

We need to be creative- sometimes helps to have both parents/ additional caregiver at hand so that the child does not disrupt / get tired

My tricks: Examine patient first and then send them to play/ excuse them/ see them in their room while I interview parents at a different spot- where applicable

Explain to parents what I am trying to see

When is it appropriate to bring a child to the clinic? What precautions should be taken?

Any medical emergency - new focal/ generalized weakness, abnormal level of consciousness, status epilepticus as examples.

Always call physician on call to get help and go over rules about how many visitors/ adults can accompany patient and which hospital entrance you will be using.

Use of home-made masks.

Care and share- please do not hoard medications