

BEST PRACTICES: EVALUATION AND TREATMENT OF PATIENTS

June 2020

When to use telemedicine (examples, but not limited to...)

- a. Postoperative Care/Reevaluations
- b. Triage
- c. Medical Cases – Initial history taking, discussion re diagnostic workup, etc.
- d. Medical Case Reevaluations
- e. Palliative / Hospice Care / Quality of Life
- f. Management and Monitoring of Chronic Conditions
- g. Behavioral Consultations
- h. Nutritional Consultations
- i. Puppy/Kitten Information Sessions
- j. New client meet and greet
- k. Prescription and pet food refills for current patients
- l. Vet to Vet consultations - all disciplines - non-urgent (dermatology, ophthalmology, surgery, oncology, radiology, etc.) and urgent care (anesthesia, critical care for emergency clinics and general practice)

Telemedicine for medical emergencies

Telemedicine can be used to triage emergency cases. The veterinary healthcare provider will determine when the patient should be directed to an animal hospital or emergency clinic.

- a. Examples of clinical signs that indicate the need for an urgent in-person visit include, but are not limited to:
 - i. Difficulty breathing
 - ii. Collapse
 - iii. White or blue gums (in patients where gums are normally pink in color)
 - iv. Severe abdominal distension
 - v. Open wounds
 - vi. Inability to produce urine
 - vii. Seizures

- viii. Severe, unrelenting pain
- ix. Ingestion of toxins
- b. When in the best judgement of the provider, some cases can be treated remotely to best prepare the patient for referral and some emergencies can be treated remotely without in-person visits.

Obtaining informed consent

It is recommended that informed consent be obtained from the client to use telemedicine. This is always good practice whether or not it is required by the state/province. [\(see VVCA informed consent template\)](#)

Selecting service offering types

Decide whether synchronous (live video chat or telephone conversation), asynchronous (text, e-mail, attachments with photos, video, lab documents, etc...), or remote monitoring services will be offered.

- a. If live video chat is selected, it is important to create a dedicated space for the telemedicine visit to ensure privacy, proper lighting and audio, and avoid interruptions.

Planning for emergencies and referrals

Create and implement a contingency plan for emergencies and referrals.

- a. If it becomes apparent shortly into the telemedicine consultation that the client has underestimated the seriousness of their pet's condition and that the pet requires in-person urgent evaluation, determine whether the best course of action would be for the patient to come to your hospital or go to an emergency hospital. This will depend on:
 - i. Location of patient relative to practice (always make sure to ask about this early in the appointment as they could be far from home)
 - ii. Ability of practice to accommodate an emergency on that particular day
- b. Provide the client with a complete record of the telemedicine consult, enabling them to share with an emergency or referral practice as needed.
- c. Provide the client with a list of nearby emergency hospitals and referral centers which includes which specialty services they accommodate, their address and contact information.

Patient evaluation

- a. It is up to the healthcare provider to use professional judgment to determine when telemedicine is appropriate to diagnose the patient case, and when it is not.
 - i. Patient evaluation should be based on the patient's medical history and access to their medical record whenever possible.
- b. To guide these decisions, the provider should utilize clinical protocols, including:
 - i. The condition to be treated
 - ii. Scope of that condition that can be treated remotely
 - iii. Guidelines required to diagnose (when is telephone, texting or email sufficient vs live video chat)
 - iv. Documentation needed to properly assess the patient's conditions
 - v. Parameters for when the condition can be treated and cannot be treated
 - vi. Guidelines for when prescribing can be performed
- c. While this provides basic, overall guidelines for practicing telemedicine, it is best practice for the healthcare provider to create more detailed protocols for each condition they intend to treat keeping in mind any regulatory restrictions in effect within their particular region.

Required information to diagnose

- a. Identifying information
- b. Source of the history
- c. Chief complaint
- d. History of present illness
- e. Associated signs and symptoms
- f. Past medical history
- g. Medication review
- h. Allergies
- i. Detailed review of symptoms
- j. Healthcare provider-directed client examination of patient (this could include mobile medical devices if available)

Prescribing medication

- a. If the healthcare provider is able to make a diagnosis or tentative diagnosis that needs treatment, prescribing medications and making recommendations for

treatment can be acceptable. (See section on Prescribing Medication in Best Practices Guideline).

- b. Always be familiar with regulatory restrictions of your licensing body on telemedicine, and particularly any restrictions or guidelines on prescribing, as this is not permitted in some jurisdictions.

Follow-up exams

Always schedule a follow up exam after an initial consultation if appropriate. This exam may be in hospital or another telemedicine consultation.

- a. Create a summary of the consultation, providing a history, working diagnosis or list of differentials, and recommendations for the client including any recommended follow-up.

Quality assurance

Healthcare providers should do regular quality checks on their telemedicine services to identify any potential risks and failures (such as with equipment or connectivity, and client or provider complaints)

Billing

Healthcare providers should inform clients of their cost for service before the visit, whenever possible. See our Billing Best Practices Guidelines.

General advice

- a. Always remember that virtual care/telehealth involves using technology as a mode of communication to assist in the provision of veterinary care.
- b. The existing legal and professional obligations of the veterinarian are not altered when veterinary medicine is provided virtually.
- c. Diagnosis and treatment of a particular case should always be done using all of the appropriate diagnostic and historical information surrounding the case.
- d. Use your best professional judgement as you would within your physical practice when you are unable to obtain all the diagnostic information that you would like to have.
- e. If you feel that you do not have enough information to make a decision regarding diagnosis and treatment, then you should insist on a physical visit to a veterinarian when available.