Telemedicine Tip Sheets for Providers and Patients

Delivering telehealth requires a unique approach and an informed patient. While the practice must ensure maximum audio and video quality and data security, it must also help patients understand the technology required to access telemedicine.

Use these tip sheets to optimize your telehealth methods and educate patients about having the right equipment and the right supporters joining their remote sessions.
Preparing for a visit:
Find a quiet place with no distractions for your visit.

Introduce yourself and let the patient know what to expect:
These small gestures can go a long way in helping patients feel more comfortable.

Technology:
"Test run" your technology before your visit to make sure it's fully charged, connected to the internet, and ready to go.

"WEB-SIDE" manner:
Bedside manner is an important indication of patient satisfaction. Be mindful of the camera location to provide eye contact and avoid eating or drinking during the visit.

Practice Intentional listening:
Use positive body language like nodding your head to acknowledge understanding; Sit up straight, uncross your arms, and try not to touch your face.
The purpose of this document is to offer providers information to enhance virtual health visits that will improve patient experience.

**TIPS TO IMPROVE YOUR WEB-SIDE MANNERS**

**Technology**
- Be familiar with virtual platforms and associated technologies
- Information Technology #__________
- WiFi and Electric/battery life secure
- Visual and sound check for every patient encounter

**Staging & Framing**
- Setting—Tidy and welcoming
- Camera is in a level balanced position
- Professional appearance proper and modest dress code
- Non-verbal awareness—Pleasant expressions and positive energy. Smiling is allowed.

---

**Open the Visit:** Address patients by their names often; Introduce yourself and explain your role; maintain eye contact by looking into the camera lense; ensure you prepared for the patient visit.

“Good morning Maria! Can you see and hear me well? My name is Dr. Care and I appreciate you taking time to see me and welcoming me into your home today. Is this still a good time to meet? Great, are you feeling safe and comfortable to continue the conversation?”

“I reviewed your medical history. I see you are having headaches. Let’s talk for a few moments to share information to help you make the right health decisions. In your words describe . . .”

---

**Compassionate Care:** Non-verbal awareness; Ask open ended questions that allow patients to share their story and symptoms; Validate your patient’s concerns; Acknowledge you are listening.

Assess and monitor patient energy level, facial expressions, rapid breathing, tone, speech pace.

“Mr. Markus, I hear concern in your voice. Tell me more about how you are feeling.”

“Rate your pain Jenny, on a scale of 1 to 10. Ten being the most pain you’ve ever had in your life.”

“I want to make sure I capture your story accurately Miss Jacob, so I’ll be typing as we talk.”

---

**Close the Visit:** Ensure patient understanding utilize the TeachBack tool; Summarize the visit; Confirm next steps; Express appreciation.

“Mr. Davis, I want to make sure I did a good job explaining your blood pressure medication change. Please tell me about the change in your own words.”

“Jay, we talked about how to manage sleeping habits. Let’s schedule another visit in two weeks, so we can talk about how you are doing. Josie will help set that up for us.”

“Have I addressed your concerns for today Mrs. Lima? Thank you for meeting with me virtually.”
This is a challenging time for healthcare, and for communicating in healthcare encounters. We are most effective when we are mindful of not only what we say, but how we say it. We offer the following quick tips, reflective of ACH’s broader training materials. These skills help build trust and increase resilience.

Note: In this era of rapidly evolving practice as well as wide regional variations due to incidence and resources, individual recommendations may or may not resonate with local practices. Feel free to contact ACH with suggestions.

_The Academy of Communication in Healthcare_

<table>
<thead>
<tr>
<th>TIP</th>
<th>THINK</th>
<th>DO</th>
<th>EXAMPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Be Present.</td>
<td>How am I feeling?</td>
<td>Make introductions.</td>
<td>“Hi. I’m the doctor taking care of you right now . . .”</td>
</tr>
<tr>
<td></td>
<td>Do I know whom I am meeting?</td>
<td>Explain role(s)</td>
<td></td>
</tr>
<tr>
<td>Identify patient’s needs.</td>
<td>Do I know what they expect?</td>
<td>Ask open-ended question(s).</td>
<td>“Tell me your main concern.”</td>
</tr>
<tr>
<td></td>
<td>What assumptions am I making?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Listen.</td>
<td>What are they saying (content)?</td>
<td>Listen for both content and</td>
<td>(Remain quiet)</td>
</tr>
<tr>
<td></td>
<td>What are they feeling? (emotion)?</td>
<td>emotion (even if not expressed).</td>
<td></td>
</tr>
<tr>
<td>Respond. Provide empathy.</td>
<td>What did I hear, both content and emotion?</td>
<td>Name what you heard. Validate emotion.</td>
<td>“It sounds like you’re having trouble breathing and you’re worried you might have the virus. It’s normal to feel worried, especially during times like these.”</td>
</tr>
<tr>
<td>Share information.</td>
<td>How can I be clear and concise?</td>
<td>Tell information in small</td>
<td>“I’m hearing you want a test. I wish we had tests for everyone. I have to follow rules that say not to test you. I know that’s disappointing. The best option for now is for us to keep in touch with you. What’s your phone number, so we can check with you in 2 days?”</td>
</tr>
<tr>
<td></td>
<td>How can I check understanding?</td>
<td>bites. Ask/answer additional</td>
<td></td>
</tr>
</tbody>
</table>


Create Rapport Quickly

<table>
<thead>
<tr>
<th>Greeting:</th>
<th>Make sure their device and yours are propped up so you can see each other, and try to match the size of your faces in the screens if possible. Start with a warm greeting.</th>
</tr>
</thead>
<tbody>
<tr>
<td>“So nice to see your face. Sorry this couldn’t be in person, but glad we can chat safely.”</td>
<td></td>
</tr>
<tr>
<td>Introductions:</td>
<td>State your name and role first. Then, ask for verbal consent to the telemedicine visit, and make sure the patient is in a suitably private space and has only the persons present that they give permission to participate.</td>
</tr>
<tr>
<td>“I just want to check again that you give permission for this visit, and that you are in a private place where only the people you want in the room with you are there. Can you tell me your full name and date of birth? Who else is with you today?”</td>
<td></td>
</tr>
<tr>
<td>Small talk before big talk:</td>
<td>“Did you have any trouble getting set up for the call today?” (Resist the urge to ask how they are feeling about coronavirus at this point)</td>
</tr>
<tr>
<td>Minimize barriers:</td>
<td>“Can you see and hear me okay? Any adjustments I can make so you are more comfortable?”</td>
</tr>
<tr>
<td>Time:</td>
<td>“We have about 15 minutes together today so I want to make sure we address your most pressing concerns.”</td>
</tr>
</tbody>
</table>

Elicit the LIST of All of the Patient’s Concerns

| Acknowledge each item: | “You’ve developed a cough and you are concerned it could be coronavirus. That’s important to discuss. What else is on your list?” |

Negotiate the Agenda

| Establish the patient’s priorities: | “Of all the things you listed, what are the most important for us to cover today in the time we have?” |
| State your clinical goals: | “Given that I’m not likely to see you in person for a few months, what refills will you need?” |
| Negotiate a plan for the visit: | “I’d definitely like to talk more about your cough and concerns about coronavirus, and to review your blood pressure log with you. We’ll talk about your refills. Is it okay if we leave the back pain that doesn’t sound like it has changed for another time?” |
Open the Conversation

<table>
<thead>
<tr>
<th>Open-ended question/request:</th>
<th>“Tell me all about this cough.” (Try not to interrupt until patient stops)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attentive and reflective listening:</td>
<td>“So the cough started a few days ago after you worked in the yard, and you noticed some itching in your eyes and some sneezing. You started to get worried. What did I miss?”</td>
</tr>
</tbody>
</table>

Explore Perspectives and Name Emotion

<table>
<thead>
<tr>
<th>Ask about ideas, impact, and expectations:</th>
<th>“What ideas do you have about what might be causing this cough?”</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>“How is this impacting you now? What would the impact be if you do have coronavirus?”</td>
</tr>
<tr>
<td></td>
<td>“What are your expectations about what we can do for you today?”</td>
</tr>
<tr>
<td>Explore and name emotions:</td>
<td>“How are you feeling about all this?”</td>
</tr>
<tr>
<td></td>
<td>“I’m hearing you’re feeling upset.”</td>
</tr>
</tbody>
</table>

Respond with Empathy – PEARLS

<table>
<thead>
<tr>
<th>Partnership:</th>
<th>“Let’s work on figuring out if you have coronavirus together.” “Let’s plan together how you are going to self-isolate at home and what to tell your family.”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotion:</td>
<td>“I can imagine how scary this must be for you, especially since cough is one of the major symptoms.”</td>
</tr>
<tr>
<td>Apology/Appreciation:</td>
<td>“I am sorry that we don’t have enough tests for everyone right now. I wish we did.”</td>
</tr>
<tr>
<td></td>
<td>“I appreciate your bringing up your concerns about this.”</td>
</tr>
<tr>
<td>Respect:</td>
<td>“This has been a difficult time for you and your family with your mother in the ICU and your brother with symptoms at home.”</td>
</tr>
<tr>
<td>Legitimization:</td>
<td>“Most people who get a cough right now would be concerned.”</td>
</tr>
<tr>
<td></td>
<td>“It is normal to be stressed when waiting for a test result.”</td>
</tr>
<tr>
<td>Support:</td>
<td>“I’m going to stick with you through this, from the testing through the treatment.”</td>
</tr>
</tbody>
</table>

COVID-19 Quick Tips to Connect: http://www.achonline.org/COVID-19/Quick-Tips
## Ending the Encounter: Skill Set 3

### Share Information

**Orient the patient to the end of the encounter:**

“We have just a few minutes left with our call, and I want to summarize and plan next steps. From what I have gathered from my questions, I am concerned you may need to be tested for coronavirus.”

**Incorporate the patient’s perspective:**

“You are worried about what this will mean to your family if you do have coronavirus, and we can review the best way to protect them.”

### Ask, Respond, and Tell (ART)

**Ask:**

“What do you know about how coronavirus infection is treated?”

**Respond:**

“That’s right - there aren’t any medicines that work to cure it at this time.”

**Tell:**

“There are some medicines that might make you feel more comfortable . . . .”

**Ask:**

“Have you heard about self-isolation?”

“What does that mean to you?”

**Respond:**

“Yes. You will have to stay in your bedroom and be the only one to use the back bathroom. That sounds like it will be hard for you, and I appreciate how you want to make sure no one else gets sick.”

**Tell:**

“Here are some other things to do to keep your family safe . . . .”

### Assess Understanding

**Ask:**

Teach-back.

“I have given you a lot of information, and I want to be sure that I was clear. What are you going to tell your family about self-isolation?”

### Close the visit

**Conclude:**

“Clarify the plan as needed.

“I am glad we talked today. Please call with further questions.”

---

**COVID-19 Quick Tips to Connect:** [http://www.achonline.org/COVID-19/Quick-Tips](http://www.achonline.org/COVID-19/Quick-Tips)

1. Consider your environment:
Find a quiet place with no distractions for your visit.

2. Technology:
"Test run" your technology before your visit to make sure it's fully charged, connected to the internet, and ready to go.

3. Caregivers:
Have the patient in the room for the visit because the doctor will want to see him or her.

4. Medication:
Have a list ready of the medications, vitamins and supplements you take.

5. Take Vitals:
If possible, take your vital signs before your visit: temperature, weight, pulse, etc.

6. Write it Down!:
Write down your symptoms and any questions you have before the visit. Have a notepad handy so you can take notes.
Engaging Patients with Telemedicine:

**Share the Benefits!**

For patients who are apprehensive about virtual visits, staff can comfort, and build patient’s confidence simply by communicating some of the benefits of telemedicine.

Share some of the benefits below to help patients learn more about telemedicine and why it may be the best type of care for them during these difficult times:

**Benefits of Telemedicine During Covid-19:**

1. Allows us to treat patients for high risk conditions without putting them at risk of Covid-19.

2. Keeps staff and providers safe so that they can continue to care for patients and provide great service.

3. Patients do not have to arrange for transportation or take off from work for the visit.

4. Most copays are waived right now.

5. Video-based visits allow you to see the provider face-to-face and have their full attention for the period of the visit.

6. Reduced wait time for the appointment.