

Telehealth Core Presenting Procedure

1. SCOPE

- 1.1. MCHS Hospital-Based Ambulatory Care
 - Telehealth Presenters
- 1.2. MCHS Clinic Ambulatory Care
 - Telehealth Presenters
- 1.3. Facilities and departments included in the scope are further defined in the [Scope Definition Resource Guide](#) if not specifically outlined above.

2. DEFINITIONS & EXPLANATIONS OF TERMS

- 2.1. Abbreviations
 - BMI: Body Mass Index
 - CMR: Combined Medical Record
 - LPN: Licensed Practical Nurse
 - MA: Medical Assistance
 - MCHS: Marshfield Clinic Health System
 - MCIS: Marshfield Clinic Information Systems
 - PCP: Primary Care Provider
 - PIP: Picture in Picture
 - RN: Registered Nurse
 - TH: Telehealth
- 2.2. Definitions
 - Codec: The video conferencing system
 - Telehealth Consult: is used interchangeably with Telehealth visit. It refers to any Telehealth Appointment
 - Telepresenter: An RN, LPN or MA who is trained to use technology, such as digital stethoscope, otoscope, examination camera, etc, to facilitate comprehensive exams under provider guidance
 - Polycom: Refers to the clinical video conferencing device or software. Used interchangeably with Codec.
 - Dashboard: Cattails application for entering data for patient visits

3. PROCEDURE BODY

Purpose Statement: The following procedure provides guidance for the Telepresenter in order to perform a complete Telehealth physical exam.

- 3.1. Preparing the room for a Telehealth Consult:
 - a. Position: position the chair or the exam table for optimum viewing
 - b. Light: If exam lighting is needed, turn on the exam lamp about 30 minutes prior to the visit to fill the room with light. If exam room has windows, close the blinds.
 - c. Background: the background behind the patient should be clear of pictures, objects, shelves, etc. to minimize distractions for the provider.
 - d. Noise: Turn ringer down on phone, after the patient and provider are connected for visit. Limit extraneous noise by exam room
 - e. Interruptions: Put sign up "Telehealth Visit in Progress" outside the door. (If applicable)
 - f. Prepare and set-up videoconference system (See [Operational Procedure](#))
- 3.2. Pre-consult Preparation:
 - a. Prepare technology to include (but not limited to): video otoscope, hand held camera, and digital stethoscope. (See [Operational Procedure](#))
 - b. Review patient CMR and appointment screen for prior notes and appointments with provider that patient is scheduled with via Telehealth
 - c. Prepare any forms needed for the Telehealth visit. (i.e. Sleep Disorder Questionnaire, PHQ-9, and Pain Questionnaire)
 - d. Have the patient wear a gown (If necessary)
 - e. Click on the provider's appointment in Dashboard to link information to the provider's documentation
 - f. Update reason for visit in Dashboard
 - g. Verify drug allergies and non-drug related allergies, update if needed
 - h. Verify medications, supplements, and doses via Medications Manager, do not change or update yet
 - i. Obtain vital signs such as temperature, blood pressure (Refer to [Lippincott Procedures](#)), height, weight, BMI, neck circumference, etc. Refer to each Telehealth Specialty Procedure Document for specific vitals needed for each visit type. Do not enter them into Dashboard yet
 - j. Check the patient into the provider's schedule
 - k. Enter any medication changes in Medications Manager and document the vitals in dashboard under the vitals tab. Be sure to select the appropriate provider and the necessary package that coincides with the visit after checking the patient into the provider's schedule. The patient's vitals should be the last thing put into dashboard as this is how the provider knows the

patient is ready. Please see [Telehealth Presenter Rooming Work Flow](#) for step by step instructions on rooming a patient

3.3. Starting the consult:

- a. The patient will check into Reception following standard clinic procedures and will wait in the waiting room until called by the Telehealth presenter
- b. Introduce yourself to the patient and escort the patient to the exam room
- c. Explain the Telehealth consult to the patient. Give the patient an opportunity to ask questions about the videoconferencing system and any aspect of the visit
 - Orient the patient to the videoconference system
 - Explain the PIP function
 - Explain the functioning of the audio in videoconferencing. Only one site can speak at a time. Any sound made while a provider is speaking may cause temporary break up of sound. Tell the patient if any part of the conversation breaks up or is missed, the provider can be asked to repeat or clarify after he or she is done with their statement
 - Ask the patient to let the Telehealth presenter know if they are having a hard time hearing the provider. The volume can be adjusted or TV Ears can be offered for the patient to wear during the visit.
 - Explain that privacy is very important and that no one else is viewing the visit. The visit is not videotaped. If the patient would like to discuss something with the provider in private, s(he) should feel free to ask the Telehealth presenter to step outside the room
 - If the patient is hesitant to talk, encourage them to look at the TV and pretend the provider is in the room
 - Encourage the patient to speak in a normal tone of voice
 - If the patient or other participants are making noise while the provider is speaking and sound is breaking up, remind them to be quiet
- d. Frame the patient in the center of the screen so that the face and shoulders are visible, with a small space above the head
- e. During the interview, orientation process, note any questions or concerns the patient may have
 - If the patient has been hesitant to ask questions during the visit, or you know they have a question they have not asked, encourage them to do so when the visit is concluding
- f. If technology problems are experienced before or during a Telehealth consult/visit contact MCIS
 - Call the IS Helpline: ext 9-3456 or 715-389-3456.

3.4. Pre – Assessment Physical Exam: Refer to Document Control for specific procedure relating to each specialty's telehealth assessment process.

- a. Sanitize your hands or wash your hands before any patient encounter
- 3.5. Assisting the Provider with the physical exam:
- a. Be sure to have stethoscope, otoscope and handheld camera charged and connected to the telehealth system
 - b. Be prepared to assist provider with all elements of the physical exam
 - The provider will direct the Telepresenter during the physical exam
 - c. Ensure the patient is always framed appropriately so the provider can see all aspects of the exam
 - d. Having the patient sitting on the exam table is preferred for visit
 - If unable to get on exam table, patient may remain in chair
 - e. Be prepared to position the patient for various assessments if needed
 - f. Use the hand held camera for any part of the anatomy the provider may need to examine up close. The provider may ask for a live shot of a specific area
 - g. Ensure the provider has good eye contact with the patient
 - h. The provider may request the Telepresenter, depending on scope of practice, to perform other types of assessments such as (but not limited to):
 - Heart Exam
 - Lung Exam
 - Reflex Exam
 - Flexion and Extension for lower back evaluation
 - Palpation of lower back
 - Strength testing of the lower extremities (RN only and directed by provider)
 - Thyroid palpation (RN only and directed by provider)
 - Edema assessment
 - Abdominal Palpation (RN only and directed by provider)
- 3.6. Post Physical Exam
- a. Reframe the patient appropriately so the patient and provider have good positions for their closing discussion
 - b. Turn off all equipment used for exam
- 3.7. Post Considerations
- a. Reinforce any patient teaching
 - b. Assist patient with prescriptions and follow-up appointment as appropriate
 - c. Print Post-visit summary per provider request
 - d. Sanitize or wash your hands after every patient encounter

- e. Sanitize all Telehealth equipment (i.e. Headphones, Otoscope, Stethoscope, vital machine, etc.) used during visit with an alcohol wipe or other MCHS approved disinfectant wipes
- f. Follow [Telehealth Facility Dual Tickler MECCA](#) guide to complete charges.

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4. ADDITIONAL RESOURCES

- 4.1. References:
- None
- 4.2. Supporting documents available:
- [Telehealth Facility Dual Tickler MECCA](#)
 - [Operational Procedure](#)
 - [Lippincott Procedure](#)

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5. DOCUMENT HISTORY

Version No.	Revision Description
1.0	New Document – Previously part of all Telehealth presenting procedures.
2.0	Took out link to Telehealth Technology Form as it is no longer used. Added Telepresenter description. Hand hygiene and equipment cleaning added. Rearranged some steps in 3.2. Added link to Telehealth Rooming Work
3.0	Refer to Version History
4.0	Removed Marshfield Clinic Logo, Updated Quick Part in Header, Reformat of Section 2, Added 3.2e., added Lippincott Procedure for Blood Pressure procedure
5.0	DCS Checklist Updated 3.3.c 4 th sub-bullet, updated 3.3.f sub bullet, updated 3.5a and 3.5b second sub-bullet, 3.5.h sub-bullets, removed 3.6b, updated new 3.6b, updated new 3.6d.
6.0	Per Julianne Elsen, updated 3.7 and hyperlink in 4.2.

6. DOCUMENT PROPERTIES

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