

Pediatric telemedicine services can work well under the right conditions

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Doctors who provide pediatric care over the telephone—known as "telemedicine"—face a range of challenges that do not come with traditional face-to-face contact. In a qualitative study led by Motti Haimi of Clalit Health Services at the Children's Health Center in Haifa in Israel, researchers found that physicians in a pediatric telemedicine service frequently face difficulties and challenges. Physicians described the difficulties with diagnosing from a distance (especially of children), treating unfamiliar patients, working alone, and managing the urgency and volume of calls. They also often faced technological hurdles, as well as a moral conflict between the desire to meet parents' expectations and maintain standards of care. The research is published in the Springer Nature journal *Pediatric Research*.

Telephone consultations allow patients to have contact with healthcare professionals remotely so that there is no need for travel. This type of telemedicine [service](#) allows doctors to assess how urgently a patient needs help and make recommendations for treatment. Researchers estimate that up to 25 per cent of doctor-patient encounters occur through telemedicine.

Telemedicine is considered a high-stress clinical activity because doctors often need to make urgent decisions in uncertain circumstances. Haimi and his colleagues wanted to investigate the experiences and attitudes of physicians working in this service and gauge whether non-medical factors also play a role in clinical decisions in this setting.

Haimi and his colleagues interviewed 15 randomly selected pediatricians who work for a pediatric telemedicine service in Israel. The service provides remote consultation for parents who need urgent medical advice about their children out of community clinic hours. Doctors working for this service conduct an initial telephone conversation with parents, but can additionally use live video chat via computers or mobile devices. They also have access to the medical records of the child.

Analysis of the interview results showed that there were six main areas that presented challenges for pediatricians. Almost all physicians said that they were worried about making a misdiagnosis or failing to assess the severity of a patient's illness because they were not physically able to examine the child. Other concerns included the fact that the doctors work at home alone and are unable to share thoughts with colleagues. The urgency and load of calls also put some of the doctors under pressure.

"To overcome the problems mentioned above, the physicians in this study used different strategies, including use of intuition, their experience, and taking protocols. They confessed that they used non-medical or contextual factors to make decisions in this high-stress environment," explains Haimi. The physicians also suggested practical tips and concrete ways in which the telemedicine process could be improved.

"It is clear that [doctors](#) working in this pediatric [telemedicine](#) service should have special qualities and skills beyond those required from standard physicians," says Haimi. "Decision-makers should be aware of the challenges and special skills and training required to succeed in this setting."

More information: Motti Haimi et al, Physicians' experiences, attitudes and challenges in a Pediatric Telemedicine Service, *Pediatric*

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