

Successful online management of COVID-19 infection

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A team of researchers in Wuhan, China have developed a multidisciplinary self-managed home quarantine method that was effective in controlling the source of COVID-19 infection and was

useful in alleviating the shortage of medical resources.

The case study "Implications for Online Management: Two Cases with COVID-19" describes the use of an [online](#)/offline multidisciplinary quarantine observation form, online monitoring, and strict compliance with quarantine measures to treat one mild and one severe case of COVID-19 infection. The mild case was able to be treated entirely at home, while the severe case ultimately required hospitalization.

"In late 2019 and early 2020, the province of Wuhan, China began to see [patients](#) with what was eventually known as COVID-19. While the pandemic has now spread across the globe, this group in China has implemented some effective ways of managing patients via telemedicine tools. These tools proved quite useful and can be seen as one effective example to follow," says Charles R. Doarn, MBA, Editor-in-Chief of *Telemedicine and e-Health*.

The multidisciplinary quarantine team was comprised of experts in medicine, rehabilitation, psychology, and nursing. Patients described their symptoms and conditions online using a quarantine observation form at least two times per day. The quarantine team created a WeChat group to ease communication. Nursing experts provided guidance on quarantine and disinfection and oversaw patients' diets and sleep schedule. Rehabilitation experts developed a feasible rehabilitation plan, and psychotherapists encouraged patients to stay optimistic. Importantly, the quarantined patients were not alone, as they had regular contact with the quarantine team, aimed at increasing their confidence in recovery and enhancing self-management capabilities.

More information: Sufang Huang et al, Implications for Online Management: Two Cases with COVID-19, *Telemedicine and e-Health* (2020). [DOI: 10.1089/tmj.2020.0066](https://doi.org/10.1089/tmj.2020.0066)

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