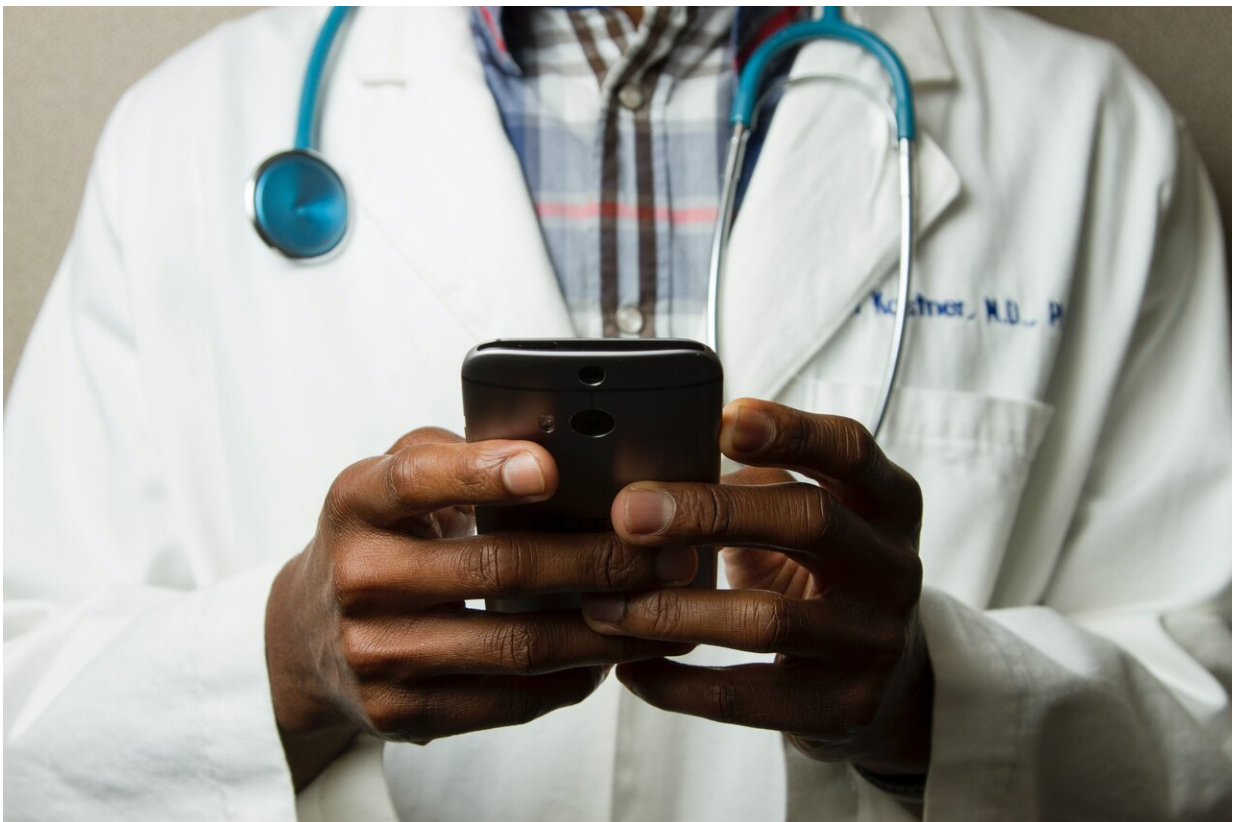


Researchers make telehealth recommendations from virtual front lines of COVID-19

June 29 2020, by Eileen Scahill



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Before the COVID-19 pandemic, The Ohio State University Wexner Medical Center used telehealth for less than 1% of patient visits. But

within a few weeks of the outbreak in early March in Ohio, telehealth accounted for more than 60% of the total visits with more than 2,500 telehealth visits per day, while maintaining high patient satisfaction levels.

Researchers at the Wexner Medical Center and The Ohio State University College of Medicine share clinical and operations guidance gleaned from this transition in a paper that was recently published in the JMIR Public Health and Surveillance.

"The COVID-19 pandemic has accelerated the [telehealth](#) tipping point in the practice of family medicine and primary care in the United States, making telehealth not just a novel approach to care, but also a necessary one for public health safety," said lead author Dr. J. Nwando Olayiwola, chair of the Department of Family and Community Medicine at Ohio State Wexner Medical Center. "Almost overnight, the increased use of telehealth became a bright spot of the pandemic, shifting clinical operations from the frontline to what we call the 'frontweb.'"

The Medical Center's telehealth workgroup employed the Clinical Transformation in Technology implementation framework to accelerate telehealth expansion and to develop a consensus document for clinician recommendations in providing remote virtual care during the pandemic.

"Social distancing requirements and stay-at-home orders required that we really shifted our operational model to a virtual one, while also ensuring high quality experiences for patients and 'websites' success," said co-author Dr. Randy Wexler, vice chair of clinical affairs at Ohio State Wexner Medical Center's Department of Family and Community Medicine. "This was a team effort and required many to make it successful."

Primary care clinicians were trained in the use of four modalities of

telehealth care:

- eVisits: electronic visits between the clinician and the patient.
- tVisits: telephone visits between the clinician and the patients.
- vVisits: video visits between the clinician and the patient.
- eConsults: electronic consults between the primary care clinician and a subspecialist-clinician that allow clinician-to-clinician communication for specialty care–related consultation.

Telehealth care was applied for a wide range of primary care needs, such as chronic disease management, physical exams, well-child visits, wellness checks, [mental health](#) follow-up, medication management, new patient encounters, acute non-emergent complaints such as back pain, headache, and rash, and lifestyle counseling.

"We believe that telehealth will be a permanent part of the care continuum for both [primary care](#) and specialists. The pandemic has changed patient expectations of the healthcare experience. Providers perceptions of telehealth have changed and they've learned to deliver a more convenient and safe patient experience," said Dr. L. Arick Forrest, vice dean of clinical affairs at Ohio State Wexner College of Medicine. "As a leading academic health center, it's our responsibility to share recommendations, best practices, lessons learned and strategies to thrive in an ever-changing landscape."

More information: J Nwando Olayiwola et al. Telehealth as a Bright Spot of the COVID-19 Pandemic: Recommendations From the Virtual Frontlines ("Frontweb"), *JMIR Public Health and Surveillance* (2020). [DOI: 10.2196/19045](https://doi.org/10.2196/19045)

Provided by The Ohio State University

Citation: Researchers make telehealth recommendations from virtual front lines of COVID-19 (2020, June 29) retrieved 4 May 2024 from <https://medicalxpress.com/news/2020-06-telehealth-virtual-front-lines-covid-.html>

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