



DRIVE-IN HEALTHCARE: TELEHEALTH FOR THE NON-TECH SAVVY REPORT #2778

BACKGROUND: Telemedicine is the process of offering virtual online care and education to patients with the use of telehealth technology. This method of healthcare delivery has helped in cutting costs, improving outcomes, and increasing patient convenience all over the country. With increasing pressures of skyrocketing care delivery costs, physician shortages, increased competition, and declining healthcare outcomes, telemedicine provides proven methodologies to overcome these challenges. The market for telehealth is predicted to grow more than 14% in 2019 and 2020. Cleveland Clinic has been using telehealth for more than four years, and a benefit they have noticed is an increase in patient engagement and satisfaction scores. The positive impacts seen from telemedicine are an increase in access to healthcare, particularly for rural areas; allows patients to connect with specialty care providers; and the reduction in no-shows and wait times for appointments.

(Source: https://www.ortholive.com/blog/25-telemedicine-facts)

TELEHEALTH AND COVID: Some telehealth modalities include synchronous, or real-time telephone or live audio-video interaction, typically with a patient, using a smartphone, tablet, or computer; asynchronous, where the provider and patient communication does not happen in real time. It's more of a "store and forward" technology which allows messages, images, or data to be collected at one point in time and interpreted or responded to later; or, remote patient monitoring, which allows direct transmission of a patient's clinical measurements from a distance to their healthcare provider. Some potential uses of telehealth during COVID are screening for symptoms; contact tracing; monitoring COVID symptoms; providing specialized care for hospitalized patients with COVID; providing access to essential healthcare for non-COVID patients; and, monitoring recovering COVID patients. Some limitations for telehealth are if addressing sensitive topics, especially if there is patient discomfort or concern for privacy; limited access to technological devices like phones, tablets, or computers; or even connectivity on the part of healthcare providers or patients may make telehealth infeasible for some people, especially in rural areas.

(Source: https://www.cdc.gov/coronavirus/2019-ncov/global-covid-19/telehealth-covid19-nonUS.html)

THE FUTURE OF TELEHEALTH: Telemedicine is bringing about more virtual clinical trials which allow the people taking part to stay in their homes most of the time while wearing remote monitoring devices. These remote gadgets could enable you to spot deviations more easily from patients' baseline readings. This could also mean recruiters are less restricted by geographic boundaries. Healthcare for inmates is something that often gets overlooked, but telemedicine is making it substantially more accessible for people in correctional facilities. This use of telemedicine is beneficial when inmates need to see specialists and don't have easy access to them through other means. Pediatric telemedicine options are more common now. The early results of an ongoing study assessing telemedicine for high-risk pediatric patients show that telemedicine is a time saver that reduces in-person visits. There is more evidence that health facilities are getting on board with telemedicine for kids.

(Source: https://www.healthitoutcomes.com/doc/the-future-of-telehealth-predictions-0001)

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