
Medicine 401 Guide to Telemedicine with Trainees

Preceptor Time Commitment:

- 1 half-day a week (or more if willing)

Instructions to Preceptors:

Thank you for participating in the Med 401 telemedicine program. We would like to go over some basic guidelines to help you make the most of this experience.

Visit Preparation

- Select 1 half-day per week for each student.
- Select 1-3 patients per half-day for student participation.
- Consider staggering appointment timing so they are not back-to-back.
- Consider alerting patients in advance that student will be joining visit.
- Send de-identified patient information in advance (such as prior clinic note) if student doesn't have remote access and can't receive secure email.
- Call students prior to clinic session to review goals of each visit.
- Identify best method for communication during the visit (instant messenger, EMR chat program, text messages.)
- Review contingency plan if technology fails (e.g. convert to 3-way telephone encounter.)

During Visit

Workflow Models

Student First Video Encounter:

1. Provider does not enter the visit with the student OR provider introduces student and patient but then leaves visit.
2. Student conducts history and physical exam with patient while documenting visit.
3. When finished, briefly present to attending the assessment and plan at the time discussed prior to visit. This may be done with patient in the virtual exam room OR via telephone or alternative video platform while patient waits in virtual exam room
4. Discuss plan together with patient.

Directly Observed Video Encounter:

- Provider introduces student and patient to one another, assists with agenda setting if needed
- Provider documents during visit
- Student takes focused history
- Student identifies which portions of the relevant physical exam can be performed and conducts exam



- Student and preceptor leave visit (or mute/close camera) and discuss plan by phone or another video platform OR student presents assessment and plan in front of patient with input from preceptor, with provider clarifying/correcting as needed.

After Visit

- Student and provider de-brief by phone or video after visit or at end of clinical session
 - o Highlight what went well and what could have been done differently
 - o Solicit feedback on technical aspects from student
 - o Opportunity to provide 1-2 teaching points that came up during encounter
- Student writes note in chart if possible OR sends de-identified note via email to provider for review and feedback

Miscellaneous:

- If video is not working...
 - o May need to switch to three-way phone call, or find different patient to see
 - o Some students have noted WIFI vs. LTE differences
- Flexibility might be required if appointment cancels; requires provider and student to maintain communication, consider identifying another patient on possibly a different day