# **Telemedicine Policy**

# Introduction

Demand for healthcare services around the world is increasing exponentially. Healthcare consumption also has grown year after year and this has led to an increase consumption. As the 4<sup>th</sup> Industrial revolution continues to gain strength, healthcare delivery also rides on the technology wave. Telemedicine will be the backbone of and reshape healthcare delivery. [i]

Telemedicine is rapidly growing in the field of medicine as technology has become a huge part of our daily lives. 88% of our population owns a smartphone while 7% of Malaysians uses their smartphone to track heath.

### **Telemedicine service with WELL HEALTHS**

WELL HEALTHS strive to provide an excellent patient centric, safe and value added telemedicine services. Hence all medical professionals including doctors, who are listed in the WELL HEALTHS platform are screened through by the Medical Board in ensuring the doctors are fully qualified to practice in their own respective field.

Telemedicine has a role to provide quick and accessible healthcare services to the general public. However it <u>shall not</u> replace the need for a patient to see a doctor face to face if they are ill. Telemedicine is not meant to provide acute management to patients. The human touch cannot be provided via telemedicine. It is strictly <u>NOT</u> meant for medical emergency. <u>Patient's safety is our priority.</u>

# **Practice of Telemedicine**

#### **Pharmacists**

Pharmacists shall be fully registered with the pharmacist board as per Registration of Pharmacist Act 1951. Registered pharmacist shall have a valid practicing certificate.

#### **Telemedicine Users**

Patients or clients that use Telemedicine services on WELL HEALTHS Platform shall agree to the terms and privacy policy stipulated on the platform. Users are required to sign up on the platform either with their email address, phone number or Facebook account and shall verify their account before proceed to use. One user account is to be used by one client or patient only. Multiple users on one account is strictly prohibited unless authorised by primary user. Users shall update their biography and personal data from time to time to ensure better healthcare delivery.

# **Ethics of Telemedicine Practice**

#### Electronic Prescription

Electronic prescription (e-prescription) encompass prescriptions for medications and laboratory testing. Prescriptions shall be valid only when it is prescribed by any RMP. Validity of the prescription shall include an electronic signature or digital signature (whichever is applicable) of the RMP.

#### **Medication Prescriptions**

RMP shall adhere to safe and ethical prescribing of medicine. RMP shall adhere to the following "3C" approach when prescribing.

- 1. *Control.* Patients shall provide information that their chronic conditions are in good control. RMP shall ensure that all personal details of the patients, including drug allergies are detailed out before prescribing.
- 2. *Compliance.* RMP shall ensure that patients are compliant to their medication and shall stress the importance of it during each consultations.
- 3. *Cautious side effects.* RMP shall be cautious of any potential side effects of the medicines. Patient's education is key to safe prescriptions.

RMP shall not provide prescriptions to any patients if any of the "3C"s are not complied.

### **Corporate Clients**

In ensuring safe practice of medicine, the following shall be followed when managing patients with chronic diseases:

- 1. The RMP shall gather and assess the general condition of the patient via WELL HEALTHS platform to determine if the patient is fit for continuation of chronic medication (LTM).
- 2. Before prescribing medications to patients, RMP shall ensure the same type of medication, the same dose and the same frequency is given.
- 3. Changes of types of medicines, dosages or frequency of medicines shall not be allowed.
- 4. Patients shall be referred back to their panel doctors if:
  - There are any changes in types, dosage or duration of medicine.
  - A further review of patient's clinical condition is needed
  - A further review of patient's medications is needed
  - Failed to satisfy '3C'
  - Patients have acute clinical problems
  - Patient developed side effects or do not tolerate LTM previously prescribed
  - "Red Flags" raised in patient's clinical condition
  - Doubts or uncertainty of patient's problem.
- 5. RMP shall not prescribe acute medication for the treatment of acute clinical condition.
- 6. RMP shall ensure that the duration of LTM prescriptions <u>do not exceed 3 months or</u> <u>less (as required by individual corporate clients)</u>
- 7. RMP shall not prescribe medications to patients that have not seen their respective general practitioners (GP) for duration **longer than 6 months.**

### **Telemedicine Etiquette**

HCP shall ensure good etiquette online. As conversations using chat platform has excessively high risk of miscommunication, HCP shall take proactive measures to ensure good online etiquette by not having unnecessary usage of strong languages, capital letters, emojis, jargons or excessive templates.

HCP shall embark on the **"3E"** approach in handling patients online.

- 1. *Education.* HCPs shall educate patients on their health conditions. Patients shall be well educated health promotion and preventive measures.
- 2. *Empowerment.* HCPs shall empower their patients to take charge of their own health. Patients can monitor their chronic disease on their own and are taught on identifying red flags.
- 3. *Encouragement.* HCPs are to encourage patient to be compliant to medication and lifestyle advice. HCPs shall set health goals to motivate patients to stay well and healthy.

#### **Limitation of Telemedicine**

Telemedicine has its limitations and do not replace conventional face to face consultation. The practice of medicine requires human touch, something which telemedicine cannot provide.

### **Clinical Governance**

- 1. Governance of clinical practice shall be overseen by the medical board, headed by the medical director.
- 2. Practice of medicine shall be evidence based and follow with the current Clinical Practice Guideline (CPG) or international guideline.
- 3. Clinical audits shall be done regularly to ensure safe practice of telemedicine.