Clinical Teaching During Telemedicine

Feedback or Questions? Contact Suzanne Minor MD at seminor@fiu.edu

Quick Tips
1. Teaching using telemedicine is very similar to teaching in the clinic. Continue using the same principles of feedback, teaching, and assessment you’ve always used.
2. Students only need to see 3-5 patients per day to have quality learning. Students can prepare, perform the visit, and write the note for each visit, including assessment and plan.
3. Just before the visit, talk to the student by phone or telemedicine about how the visit will go. You can either:
   a. Be on the visit the whole time, but allow the student to take the history, do the PE, and then present the problems/a/p to you. While the student takes the history, be the scribe and write the note during the visit and input orders.
   b. Join the telemedicine visit when the student is done with the history and ask the student to do the needed PE and present the discussion in front of the patient, letting the patient know that you encourage them to let you know if there’s anything that they’d like to add or clarify.
   c. Have the student observe you initially so they know how telemedicine visits go and then be ready for the next telemedicine visit. If students are observing, they can write the note.
4. After the visit, debrief with the student by asking the student: What stood out? What did the student do well? Where can the student improve. If you have lots of patients, do this at the end of the day.
5. After the visit, ask the student to write the note in the EMR. CMS rules allows the student work to be used for EMR documentation as long as you review, edit, and attest.

If you have more time, here are more tips to help you with precepting via telemedicine.
Choose how your visit and student interaction will go:

1. **You are observing the student via Telemedicine and you’re writing the note**
   Generally, this is done when working with a 3rd or 4th year student for the first time so that you can understand their skills.
   1. Before the visit (this is just the student and faculty)
      a. Student needs access to EMR beforehand so that they can prepare for the visit.
      b. Start off with the student and faculty on the same medium (doximity/zoom/etc) first
         i. If the student is off-site, this is a good time to prep the student for the visit
         ii. Let the student know how the visit will go – are you observing and scribing OR are you leaving the student to it and returning after the history has been obtained?
         iii. Add the patient after you have prepared with the student.
   2. During the Visit (this is the student, patient, and faculty)
      a. Introduce the patient to the learner and advise the patient that you will take yourself off video while staying on to observe to allow the learner to lead the discussion
      b. Obtain the patient’s consent for the telemedicine visit.
      c. During the visit, you can communicate privately with student in the Zoom chat box (for instance, to guide student what to ask in obtaining the history or while creating the management plan.
      d. When ready to rejoin the visit, start your video and rejoin.
      e. Ask the student to discuss each item from the visit (problem list) and the assessment and plan for each item with faculty and patient.
1. Before the visit (this is just the student and faculty)
   a. Student needs access to EMR beforehand so that they can prepare for the visit.
   b. Start off with the student and faculty on the same medium (doximity/zoom/etc) first
      i. If the student is off-site, this is a good time to prep the student for the visit
      ii. Let the student know how the visit will go – are you observing and scribing OR are you
          leaving the student to it and returning after the history has been obtained?
      iii. Add the patient after you have prepared with the student and start the visit and then
          turn it over to the student OR allow the student to start the visit.

2. During the Visit (this is the student and patient; you are on for just a moment)
   a. Introduce the patient to the learner and advise the patient that you will take yourself off video
      while staying on to observe to allow the learner to lead the discussion
   b. Obtain the patient’s consent for the telemedicine visit.
   c. Leave so the student can obtain the history

3. During the Visit (this is the student, faculty, and patient)
   a. Join the visit
   b. Let the patient know that the student is going to tell you about the patient’s concerns and that if
      we aren’t getting it right or if the patient wants to add or clarify anything, to please do so.
   c. Ask the student to present the patient interaction. Discuss each item from the visit (problem
      list) and the assessment and plan for each item with faculty and patient.
      i. For example: Number 1 is DM. The latest A1C is 7.9, so just a little high. Ms. A wants to
         keep her current medication but increase her exercise. We also discussed a dietician
         consult and repeat A1C in 3 months.
   d. The student provides patient education with your guidance and the patient, faculty, and student
      come to agreement on plan of care.

4. After the visit, the student writes the note

5. After the visit, debrief with the student by asking the student: What stood out? What did the student
   do well? Where can the student improve. Give feedback on the student’s note. If you have lots of
   patients, do this at the end of the day.

2. You are asking the student to obtain the history and you will join the visit after that
Generally, this is done when you feel the student or resident can obtain history and perform PE without you needing to directly observe the interaction with the patient.
   1. Before the visit (this is just the student and faculty)
      a. Student needs access to EMR beforehand so that they can prepare for the visit.
      b. Start off with the student and faculty on the same medium (doximity/zoom/etc) first
         i. If the student is off-site, this is a good time to prep the student for the visit
         ii. Let the student know how the visit will go – are you observing and scribing OR are you
             leaving the student to it and returning after the history has been obtained?
         iii. Add the patient after you have prepared with the student and start the visit and then
             turn it over to the student OR allow the student to start the visit.

3. During the Visit (this is the student, faculty, and patient)
   a. Join the visit
   b. Let the patient know that the student is going to tell you about the patient’s concerns and that if
      we aren’t getting it right or if the patient wants to add or clarify anything, to please do so.
   c. Ask the student to present the patient interaction. Discuss each item from the visit (problem
      list) and the assessment and plan for each item with faculty and patient.
      i. For example: Number 1 is DM. The latest A1C is 7.9, so just a little high. Ms. A wants to
         keep her current medication but increase her exercise. We also discussed a dietician
         consult and repeat A1C in 3 months.
   d. The student provides patient education with your guidance and the patient, faculty, and student
      come to agreement on plan of care.

3. You are doing the visit and the student is observing
Have the student observe you initially so they know how telemedicine visits go and then be ready for the next telemedicine visit. If students are observing, they can write the note.
You may choose this option if you are just starting to work with the student or if the patient doesn’t feel they
want the student to lead the visit.
   1. Before the visit (this is just the student and faculty)
      a. Student needs access to EMR beforehand so that they can prepare for the visit.
b. You might ask the student to take notes or to actually write the note in the EMR during the patient interaction.

c. Start off with the student and faculty on the same medium (doximity/zoom/etc) first
   i. If the student is off-site, this is a good time to prep the student for the visit
   ii. Let the student know how the visit will go – are you observing and scribing OR are you leaving the student to it and returning after the history has been obtained?
   iii. Add the patient after you have prepared with the student and start the visit and then turn it over to the student OR allow the student to start the visit.

2. During the Visit (this is the student, faculty, and patient)
   a. Introduce the patient to the learner and advise the patient that the student is going to observe the visit, with their permission.
   b. Obtain the patient’s consent for the telemedicine visit.
   c. Perform the visit
   d. You might ask questions of the student that naturally come up. For instance, if the patient asks how a medicine works or if there are options for stopping smoking. This allows the student to still be engaged.
   e. The student is taking notes or writing the note in the EMR.

3. After the visit, the student writes the note

4. After the visit, debrief with the student by asking the student: What stood out? What did the student do well? Where can the student improve. Give feedback on the student’s note. If you have lots of patients, do this at the end of the day.