

## Guidance to trainees learning tele-consultation outpatient skills

### Learning objectives and outcomes

1. Understand the restrictions of tele-consultation
2. How to make a tele-consultation more effective

In many ways undertaking tele-consultations, with or without video is more challenging than face-to-face consultations because of:

- the lack of non-verbal communication (even with video-consultations these are blunted)
- the inability to undertake clinical examination.
- the difficulty in establishing an empathic relationship with patients.

This guidance intends to set out recommendations for physician trainees as they develop their skills in this important area of work.

1. Prepare well so that you know your patient. Review their notes and write a 'sketch-summary' that includes:
  - Past medical history
  - Active diagnosis
  - Active investigations and outcomes
  - Previous significant investigations and outcomes
  - Awaited investigations
  - Recent admissions
  - Recent consultations: what actions were taken/conclusions drawn
2. Use a headset. Do not rely on your computers microphone and speaker because you cannot be sure who may overhear the consultation.
3. Introduce yourself and offer a number on which the patient can call the hospital back to confirm to whom they are speaking.
4. Confirm to whom you are speaking:
  - Name
  - Date of birth
  - Alternative contact number
5. Confirm that the patient is:
  - Comfortable to proceed with the consultation,
  - Whether anybody else needs to be there to help with the consultation and if there is someone else present whether they are able to talk freely.

- Reassure the patient that confidentiality will be sustained.
  - The patient should be encouraged to give the consultation full attention and to avoid other simultaneous activities including driving.
6. Be aware of the elements of a face-to-face consultation that you are not able to pick up/undertake.
  7. Neither you nor the patient will be picking up non-verbal signals. This can lead to talking over each other. Ensure adequate pauses are left in the conversation for extra information to be added by either party.
  8. Check the medication the patient is on. You may wish to consider asking the patient to have a list of their medication to hand when the appointment is booked.
  9. Investigations:
    - Have an awareness as to how investigations can be booked if needed.
    - Make sure you book the investigations before moving on to the next patient
  10. End of the consultation
    - Review decisions and actions
    - Review what further communications the patient will receive including notification of any planned investigations
    - Review understanding
    - Define why a further consultation is needed and (realistically) when
    - Review how any further consultation will be conducted i.e. a further virtual consultation or whether a face to face meeting is more appropriate.
  11. Write a structured letter that includes if and why a further appointment is needed.