

# Georgian Bay Clinic

## TELEMEDICINE CLINICAL PROTOCOL

**Organization: Georgian Bay Clinic**

**Service/Program/Clinic: Methadone Clinic**

**Consultant: Dr. Paul Hoogeveen**

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### 1.0 Overview

**Inclusion Criteria – Methadone patients in Wasaga Beach/Stayner/Collingwood area**

### 2.0 Referral and Scheduling Procedure -

Self-referral – Patient can self-refer at SGB CHC.

Patient is notified that MD will see patient by TM and least once in person. The in person visit will be in the first 6 weeks of treatment and will take place at SGB CHC or GBC in Midland depending on MD availability.

SGB CHC staff to call GBC or SGB CHC RN to schedule appointment time for patient.

RN at SGB CHC to call clinic as patients arrive and set an agreed upon time between the two sites to have MD see the patient over video. RN to schedule the visit in ncompass.

### 3.0 Preparation Requirements

Patient Preparation – On first visit to CHC – RN to complete GB Clinic consent package and include TM consent form. This will be filed to patients chart.

An observed urine sample will be provided by the patient in urine collection monitored washroom. The urine sample will have a UDS performed by the RN at CHC and results posted to patient's e-record PV for MD to review.

#### Telemedicine Studio Preparation

The OTN camera and microphone are positioned so that all participants in the TM visit can be seen by GBC MDs. Blinds and doors are closed. A sign is placed outside the door stating -“ Do not Disturb: Telemedicine Session in Progress” The MD to call into the video system at the SBG CHC and the RN at CHC to schedule appointment after in ncompass

## **Starting Telemedicine Sessions**

- √ The CHC RN verifies the identity of the patient.
- √ The CHC RN explains how the system works to the patient and reviews how their personal health information will be protected and kept private.
- √ The GB Clinic MD introduces himself to the patient before the exam begins.
- √ The patient encounter continues with examination and assessment components as required.

## **Examination and Assessment Requirements**

### **4.0 Telemedicine Session**

**The MD will create an appropriate prescription for the patient and the prescription will be faxed to the appropriate pharmacy.**

## **Ending Telemedicine Sessions**

- √ The GBC MD makes recommendations for follow-up, replicating as closely as possible how this is managed in an in-person visit.
- √ The patient is informed if a follow-up visit is required, and whether the next visit will be by telemedicine or in-person. Appointment is scheduled in e-record PV and ncompass at this time.

## **5.0 Follow up urine samples and prescriptions**

For visits to SGB CHC for urine sampling only an observed urine sample will be provided by the patient in urine collection monitored washroom. The urine sample will have a UDS performed by the RN at CHC and results posted to patient's e-record PV for MD to review. The patient is provided with their next prescription.

For follow up appointment with the MD the following will occur.

An observed urine sample will be provided by the patient in urine collection monitored washroom. The urine sample will have a UDS performed by the RN at CHC and results posted to patient's e-record PV for MD to review.

The SGB CHC RN to call clinic as patients arrive and set an agreed upon time between the two sites to have MD see the patient over video. RN to schedule the visit in ncompass.

GBC to fax prescription to appropriate pharmacy.

Appointment for next visit scheduled in e-record.