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Practical Information for Virtual visits:

During this Covid-19 pandemic, physicians in Saskatchewan have responded in an unprecedented fashion to manage the care of their patients – the College is very grateful for the time, effort and commitment exhibited by its members.

One of the relevant aspects of care delivery is the provision of virtual care to patients. We have received queries about the provision of virtual care and we hope that the following points may assist with this. This is not intended to cover all aspects, and may serve as a resource only.

When considering providing virtual care:

1. Review The CPSS Policy on the Practice of Telemedicine which establishes expectations for physicians providing care and advice through telemedicine.
2. Review the CPSS guidance document on delivering virtual care during the COVID-19 pandemic.
3. If you will be providing virtual care within your current scope of practice, knowledge and experience, you will not need approval from the College to do so. Should you plan to provide services outside of your regular scope, please refer to the CPSS application for a scope of practice change to provide virtual care during a pandemic.
4. Consider the Medical-legal issues prior to providing virtual care visits – Visit the CMPA website for detailed guidance.
5. Be aware of and stay up to date with local referral patterns, locations of testing and treatment centres, as well as guidelines and policies in place in Saskatchewan which may be amended and updated in a very short time frame, as communicated by the Saskatchewan Government and the Saskatchewan Health Authority.
6. Ensure that high quality equipment will be used to allow for adequate sound and camera resolution.
7. Although the College does not mandate the use of any specific platform delivering virtual care, please make sure that the apps or platform you will be using is HIPA compliant and meets the requirement of the Privacy Commissioner.

Preparing for a virtual care visit:

1. In preparing for the visit, follow the usual steps your office follows when registering a patient, including:
   a. record/update patient demographic elements,
   b. verify the patient's health insurance card number and expiry date,
   c. Note the reason for visit.

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and guiding the profession to achieve the highest standards of care

2. Do your best to authenticate the patient's identity, possibly by asking them to hold up a piece of valid government issued photo ID to the camera to confirm this.
3. Obtain and record consent, and remember to disclose the limitations and the risks of a virtual visit. The patient may be asked to email a signed consent form to you. (An example of a consent form can be found on the CMPA site.)
4. When using an unregulated virtual care tool, you should record in the patient's file that verbal informed consent was obtained. The following statement can be considered for your encounter note: "Informed verbal consent was obtained from this patient to communicate and provide care using virtual care and other communication tools. I have explained to this patient and the patient acknowledged understanding the risks related to unauthorized disclosure or interception of personal health information and steps they can take to help protect their information."
5. Ensure that you are in a private location, and that the patient is in a location where they feel they can adequately share private and confidential information.
6. Avoid sharing your private phone numbers by blocking outgoing call display.
7. Consider setting up a clinic e-mail address, and if you are sharing information via your private e-mail, consider activating the E-mail program automatic reply, with a disclaimer indicating:

   - that the e-mail address is not monitored,
   - that you will not reply by giving medical advice,
   - the appropriate way to contact you/your office including the contact numbers,
   -
   - the hours of availability and
   - If this is an emergency that the patient should contact 911.
8. When considering the use of e-mail as a patient communication tool, physicians must comply with the privacy requirements in Saskatchewan (see Office of the Information and Privacy Commissioner).
9. If you do not have an EMR, or if your EMR does not have e-prescribing capacity, consider setting up access to the Pharmaceutical Information Program (PIP), available as an expedited process through the CPSS: PIP e-prescribing during the pandemic to ensure safe and secure prescriptions which are then available at any Saskatchewan pharmacy.

During a virtual care visit:

1. Do not compromise the standard of care. To the extent reasonably possible, a physician should practise to the same standards as when there is no emergency and when the patient is seen in-office, in keeping with the College's CPSS Standards for Primary Care.
2. Practise proper "Web-Etiquette" (be punctual, use appropriate high-quality equipment, create a professional space, dress appropriately, communicate effectively etc.).
3. Practise only within your scope of skill, knowledge and experience.
4. Ensure careful patient selection and be aware of situations which may not be appropriately assessed during a virtual care visit. These may include new and significant emergency symptoms such as chest pain, shortness of breath and loss of neurologic function. These may also include cough, abdominal/gastrointestinal

symptoms, musculoskeletal injuries or conditions, most neurological symptoms and congestive heart failure.

5. Be aware of the lack of "visual cues" – as physicians, we can observe patients in many ways when seen in-person, and their movement, body language, demeanor and other very important clinical information cannot be assessed virtually.
6. Keep detailed and high-quality notes, consistent with the CPSS Regulatory Bylaw 23.1
7. Do your best to ensure continuity of care, by sending documentation to their regular physicians, facilitating referrals, providing advice for follow-up, etc.
8. Ensure that all tests ordered are managed and followed up by the ordering physician in accordance to the CPSS Standards for Primary Care.
9. When referring the patient for an assessment, provide detailed information on what the patient should do next, and facilitate the referral by contacting the ER/colleague/hospital you are referring to, via a secure method of information sharing.
10. Provide detailed follow-up instructions in all cases, schedule follow-up visits, and make sure to inform the patient how to obtain the medications, if any were prescribed.

SMA's recommended platform to provide virtual care:

The SMA, in collaboration with the Ministry of Health, has made progress on facilitating the patient video assessment. A software called PEXIP (https://www.pexip.com) has been previously evaluated and assessed. This software has been selected to deploy in physician clinics to support your immediate need for patient video assessments.

Billing for a virtual visit:

Billing through MSB is not under the purview of the CPSS. The billing fee code for video assessment is 515A. Please review the SMA guidance for billing for virtual care.

Applicable CPSS standards, guidelines and policies:

- The CPSS Policy on the Practice of Telemedicine establishes expectations for physicians providing care and advice through telemedicine.
- Guideline: Physicians and health care emergencies.
- Guidance document on delivering virtual care during the COVID-19 pandemic
- Policy: CPSS Standards for Primary Care
- Guidance document: CPSS expectations of Physicians during the COVID-19 Pandemic
- Guidance document: Guidance to Physicians regarding patient care issues during the COVID-19 pandemic
- Guideline: Patient-Physician Communication Using Electronic Communications.
- Policy: Informed Consent and Determining Capacity to Consent

Saskatchewan Ministry of Health instructional guide to Virtual Care

An overview of the platforms that can be used for one-on-one visits, group meetings and billing information

References:

Dr W Oberholzer Revised 2020.05.13

1. Providing virtual care during a pandemic: [A guide to telemedicine in the paediatric office](#)
2. Telemedicine during COVID-19: [Benefits, limitations, burdens, adaptation](#)
3. Operationalizing [Virtual Visits During a Public Health Emergency](#)
4. Canadian Medical Association: [Virtual Care Playbook](#)
5. 7 Telemedicine Etiquette Tips[: What Your Patients Expect](#)
6. CMPA article: [Thinking of working with virtual clinics? Consider these medical-legal issues](#)
7. Doctors of BC – [Virtual Care Toolkit](#)
8. CPSA Advice to the Profession: [Virtual Care, Covid-19](#)
9. The Lancet: [Virtual health care in the era of COVID-19](#)
10. CMPA: [COVID-19 Hub](#)
11. CPSO: [COVID-19 FAQS FOR PHYSICIANS](#)
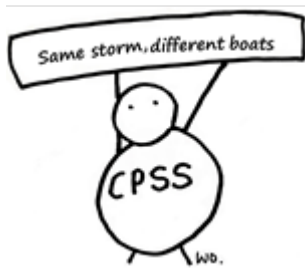
Sincerely,

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