

CONSIDERATIONS:

1. Remote patient monitoring (RPM) can be store and forward (asynchronous) or live-interactive (synchronous) technology:
 - a. Store and forward (asynchronous) RPM is the collection of patient clinical data at a single point in time that is transmitted to the telehealth monitoring program for later review. This is often called telemonitoring
 - b. . Telehealth Monitoring Visits allows the nurse to evaluate a patient’s health status and coach/cue a patient over the telephone to perform a task that has previously been taught.
2. The goals for both types of RPM include:
 - a. Early symptom identification with intervention for disease exacerbations
 - b. Reduction in re-hospitalizations and emergency room visits
 - c. Improvement in patient self-care management
 - d. Reduced unscheduled nurse visits
3. Follow-up actions by agency staff, based on patient health status assessment, may include:
 - a. Education/counseling
 - b. Home treatment advisement
 - c. Disease management-specific intervention
 - d. Referral to physician
 - e. In-home nursing visit
 - f. Urgent/emergent intervention
4. Patient will have consented to and received instruction in the use of RPM.
5. Patient information gathered through RPM will be used for patient case conferences and considered when reviewing the Plan of Treatment/Plan of Care.

EQUIPMENT:

Telehealth monitor
Peripheral devices – BP monitor/cuff, scale, pulse oximeter, glucometer, etc., as needed
User guides for equipment and telehealth monitoring program
Agency standard protocols
Emergency guidelines
Patient Plans of Care

PROCEDURE:

1. Telemonitoring:
 - a. Access the telehealth monitoring program according to the vendor instructions/recommendations
 - b. Review the results that are transmitted from the patient’s telehealth monitor:
 - i. If results are within defined parameters, no further action is required
 - ii. If results are outside the defined parameters:
 1. Review all responses: Symptoms, behavior, knowledge

2. Review patient’s medical record for recent clinical findings, especially medications
3. Contact patient to evaluate health status
- c. Determine the risk level:
 - i. Emergent: Results require 911
 - ii. Urgent: Emergent care likely or immediate physician contact required
 - iii. Potentially urgent: Nursing visit same day or within 24 hours
 - iv. Non-urgent: Routine or informational
- d. Take appropriate action to address any results that are outside of defined parameters:
 - i. Contact physician according to situation
 - ii. Implement ordered interventions
 - iii. Collaborate with patient on plan
 - iv. Patient should express his/her understanding of the plan:
 1. Intent to comply with the plan
 2. Comfort with the plan
 3. Will call back if condition worsens or has concerns
- e. A nursing visit may be necessary if:
 - i. The patient is presenting symptoms that cannot be adequately assessed over the phone
 - ii. An intervention is warranted that cannot be accomplished without clinician assistance
- f. Review the telehealth program for non-responders:
 - a. Contact the patient to determine the reason for no response
 - b. Reinforce the importance of the program and compliance with monitoring activities
 - c. Provide instruction for use of equipment, as needed
 - d. Consider scheduling a trouble-shooting visit to the patient’s home if problems persist

1. Telehealth Telephone Monitoring Visits
 - a. Determine skill of the patient or caregivers to use phone
 - b. Determine the required frequency of Telehealth Monitoring Visit calls
 - c. Encourage patient or caregiver to teach back as much of task as possible
 - d. For verbal cueing during a telehealth Monitoring Visit:
 - i. Determine the patient or caregiver’s ability to perform the task with cueing
 - ii. Determine nursing frequency while patient is receiving cueing
 - iii. Assessment of patient’s continued ability to be cued to perform task should occur at each nursing visit.

- iv. A comment is entered into the visit frequency comment section in HealthWyse. It states that the patient receives Telephone Monitoring Visits from telehealth for cueing, what kind of cueing, and that the purpose of the visit is to assess patient's ongoing ability to continue with telephone monitoring visits. It will also state that the cueing process should not be interrupted.
- v. A calendar is posted in the telehealth area noting which nurse will call the patient each day along with a calendar in the patient's home to cross off each day after the telephone visit.
- vi. Specific cueing instructions are located in the telehealth department in the patient cueing book and the shared telehealth folder on telehealth nurses' desk tops.

AFTER CARE:

- 1. Telemonitoring
 - a. Document all contacts with the patient/caregiver and physician.
 - b. Document all telemonitoring activities:
 - i. Patient results
 - ii. Pertinent assessment findings, problems identified and interventions taken. Include what was taught, patient response, and progress toward goals
 - c. Follow-up actions for program non-responders
 - d. Notify the physician of RPM activities (fax weekly and PRN):
 - i. Provide trend reports of vital signs, etc., on routine basis
 - ii. Request order for interventions when needed for results outside defined parameters
 - iii. Interventions implemented based on results and their effectiveness
 - e. The clinician who reviews and acts upon the patient results should document and communicate the events to the other clinicians involved in the patient's care:
 - i. Telehealth monitoring nurse to the case manager, primary nurse or therapist, etc.
 - ii. Visiting clinicians to the telehealth monitoring nurses
 - f. Remote patient monitoring may be discontinued when deemed no longer necessary
- 2. Telehealth Telephone Monitoring Visits:
 - a. Pertinent assessment findings, problems identified and interventions taken. Include what was taught, patient response, and progress toward goals

REFERENCE:

- American Telemedicine Association (2012). *Quick Guide to Live-Interactive Teledermatology for Referring Providers*. Retrieved April 16, 2012 from <http://www.americantelemed.org>
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- College of Registered Nurses of Nova Scotia (2008). *Telenursing Practice Guidelines*. Retrieved April 16, 2102, from <http://www.crns.ca>

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