

GUIDELINES FOR DOCTORS IN TELEMEDICINE

1.BASIC INTRODUCTION

- Doctors should speak in regional language with the patient which makes them understand
- Doctor should make the patient comfortable by asking basic details like name, age, occupation...etc which will take about a minute.

2. **CHIEF COMPLAINTS** followed by **History of presenting illness (HOPI)**, which includes details of the complaints like duration, type, any association...etc.

Example: For patients with c/o **fever**, need to ask since how many days he is experiencing symptoms, high grade or low grade.,associated with chills and rigors etc..

- Should rule out negative history

Example: Patient with c/o fever and cough more than two weeks, we need to ask whether there is loss of weight /loss of appetite **for differential diagnosis.**

3. **Personal History** in relevant cases like type of diet, lifestyle and habits like smoking, alcohol, drug abuse...etc.

4.Medical History

Present medical history of the patient such as, Type 2 DM, Hypertension, Thyroid disorders, Bronchial asthma, COPD, Cardiac illness, Cancers...etc

5. Past History :

- Previous illness/Hospitalization if relevant
- Any major surgery.
- Blood transfusions if necessary

6. **Drug History:**

- Should ask about current medications if any ,which includes name, dosage, frequency and duration.
- Allergy to any drug.

7. **Family History:**

- Has relevance in case of Familial/Inherited diseases like Type 2 DM, Bronchial asthma etc.,
- Sometimes in communicable diseases like Influenza, covid infection etc.,

8. In **FEMALE PATIENTS**, need to ask about **Menstrual History** if it has any association to present medical condition

General examination & Necessary Investigation

1.Assessment of general condition of the patient which involves consciousness, orientation, other obvious visible signs etc.,

2.**VITALS-** Temperature, pulse rate, SPO₂, BMI should be recorded in all cases.

- Necessary in some cases

For ex: In case of fever, temperature and pulse rate are must.

- If patient is k/c/o Type 2 DM and c/o fever with chills and rigors, dysuria, necessary investigations would be
 - a)RBS, Urine routine to rule out urinary tract infections.
 - b)If urine routine confirms, UTI ask the patient to get the urine culture and sensitivity to be done for further management

TREATMENT

With all the above points, make a probable **DIAGNOSIS** and treat the patient accordingly.