

DETERMINING CLINICAL APPROPRIATENESS FOR VIRTUAL CARE VISITS

As family physicians begin to expand their use of in-person care during the COVID-19 pandemic, physicians are now asked to determine the most appropriate modality for patient care services. Determining the appropriateness of virtual care for each patient service will ultimately rely on your clinical judgement. [Beyond Essential Services in Primary Care](#) provides a framework to assist in balancing the benefits and risks of providing in-person or virtual care for individual patients.

You can use information from the [College of Physicians and Surgeons of BC](#) and the [CMA Virtual Care Playbook](#) to assist you.

Guidance for Physicians

It is the medical care of the patient and not the setting of the medical practice that must guide the ethical, professional, and clinical decisions around the provision of appropriate medical care.

Appropriate use of virtual care continues to include routine check-ups, follow-up appointments and consultations where a physical assessment is not necessary.

Physicians can safely use virtual care to:

- Assess and treat mental health issues;
- Assess and treat some skin problems ;
- Assess and treat urinary, sinus and minor skin infections;
- Provide sexual health care, including screening and treatment for sexually transmitted infections, and hormonal contraception;
- Assess and treat conditions monitored with home devices and/or lab tests (e.g., hypertension, lipid management, thyroid conditions and some diabetes care);
- Review lab, imaging and specialist reports; and
- Conduct any other assessments that do not require palpation or auscultation.

Consider the following questions when making your clinical judgement about the appropriateness of virtual care for each patient encounter:

Level of physical examination required

- How likely is it that the patient's presenting concern will require hands-on assessment or treatment?
- Will it be possible to deliver substantively similar care in a virtual visit as you could in-person?

Level of visual assessment required

- How likely is the patient's presenting concern to require more than general visual assessment?
- If care outcomes are improved through visual observation, would videoconference and/or photos be suitable?

Level of complexity

- How complex is the patient's general medical condition?
- How complex is the conversation you need to have with the patient?
- Are you sharing a diagnosis or delivering bad news?