



The College of Physicians and Surgeons of Prince Edward Island

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POLICY NAME	Telemedicine
DESCRIPTION	<p>Telemedicine is the provision of medical expertise for the purpose of diagnosis and patient care by means of telecommunications and information technology where the patient and the provider are separated by distance. Telemedicine may include, but is not limited to, the provision of pathology, medical imaging and patient consultative services.</p> <p>Some current examples of telemedicine include, but are not limited to, the use of telephones (landlines and mobile), email, texting, video and audio conferencing, remote monitoring, and telerobotics.</p> <p>The reading of tests (such as laboratory or EEGs) done on PEI but sent out of province for interpretation is not considered telemedicine. However, radiologists remotely reading and reporting on radiological examinations done on PEI is considered telemedicine and the radiologist would need a Visiting Consultant license.</p> <p>This policy applies to all physicians who are members of the College of Physicians and Surgeons of PEI (CPSPEI), regardless of where the physician or patient is physically located when telemedicine is practiced.</p> <p>Legislation: <i>Medical Act</i></p> <p>48. (1) Nothing contained in this Act shall affect, modify or limit any law applicable to the confidential or ethical relationships between a medical practitioner and a person receiving the professional services of a medical practitioner.</p> <p>63. Nothing in this Act applies to or prevents</p> <p style="padding-left: 40px;">(a) A physician or surgeon entitled to practice medicine in any other province or country from consulting in Prince Edward island with a medical practitioner who holds a license;</p> <p>Principle of “<i>Do no harm</i>”</p> <p>The responsibility of the CPSPEI is to establish standards of care; this is, at least partly, achieved by the licensure of Physicians who will provide that standard. Under the traditional model, the CPSPEI tries to ensure public safety through its Registration and Discipline processes. The government and hospitals try to ensure public safety through high quality ancillary services. Technology cannot be an extra barrier separating physician and patient; rather it must ease the communication required for good patient care.</p> <p>The Doctor-Patient relationship</p> <p>A physician-patient relationship is established via telemedicine in the same circumstances as when the relationship is established in person. What has changed is the possibility that a physician elsewhere may become the Most Responsible Physician.</p>

Elements of a good doctor patient interaction include:

- 1) A fiduciary responsibility of the physician to the patient
- 2) Appropriate use of ancillary services (diagnostic imaging, lab services, supporting services, consultation services) of good quality
- 3) Good communication with the patient
- 4) Follow through by the patient

Telemedicine does not alter the ethical, professional and legal requirements around the provision of appropriate medical care. Telemedicine should only be used when the potential benefits outweigh the risks and it is in the best interest of the patient. The CPSPEI expects any PEI physician who provides telemedicine services to adhere to the same standards of practice as a physician who sees a patient directly.

The physician should exercise caution when providing prescriptions or other treatment recommendations to patients whom they have not personally examined. Physicians should not prescribe narcotics or other controlled medications, or issue medical marijuana to patients whom they have not personally examined or with whom they do not have a longitudinal treating relationship, unless they are in direct communication with another licensed health care practitioner who has examined the patient and has a longitudinal treating relationship, and both are in agreement with the treatment plan.

Physicians providing telemedicine services will sometimes work in teams with other healthcare providers, under the direction of the physician. When the physician provides a formal consultative opinion on patient care through a team of collaborating healthcare workers for whom the physician is responsible, the physician is practicing telemedicine and would require registration and licensure in the patient's jurisdiction. The gathering of information only by another healthcare worker, under the control of the physician, is considered practicing medicine if the physician acts solely on the information, and would require registration and licensure in the patient's jurisdiction. When a healthcare worker has a delegated role approved by the physician to provide medical care or advice to the patient, and the physician is held ultimately responsible, then this would be considered practicing telemedicine by the physician and would require registration and licensure in the patient's jurisdiction.

Registration:

Before registering and licensing a physician for telemedicine, the CPSPEI must ensure that:

- (1) A Specialist Consultant satisfies the requirements under the PEI Medical Act for registration in the Medical Register and the Specialist Register;
- (2) A Family Physician satisfies the requirements under the PEI Medical Act for registration in the Medical Register and the Family Practice Register; or
- (3) A Specialist Consultant or a Family Physician satisfies the requirements under the PEI Medical Act for registration with an independent, unrestricted license in the Temporary & Limited Register, and must already be registered and hold an independent, unrestricted license in the jurisdiction from where they are, or will be, communicating with the patient in PEI.

A Specialist Consultant who is licensed with the CPSPEI as a Visiting Consultant qualifies to do telemedicine in PEI.

When a CPSPEI registered physician provides telemedicine to a patient in another province, territory or country, the physician must comply with the registration and licensing requirements of that jurisdiction.

	<p>Areas that may not require formal registration for telemedicine in PEI include:</p> <ol style="list-style-type: none"> 1) The gathering of information only by another health care worker, under the control of a physician, does not constitute the practice of medicine (unless medical care or advice is provided or that physician acts solely on the information). 2) A patient who has been under the care of an out-of -province physician may continue the relationship via telemedicine as long as that physician remains licensed and in good standing in another province of Canada. For example, post-operative checks. 3) An out-of-province physician shall not be considered to have practiced medicine on PEI, solely on the basis of exchange of information, such as obtaining informed consent for upcoming surgery. 4) A formal consultation requested by a PEI licensed physician, both physicians being in collaboration with each other. <p>Complaints: The CPSPEI will review written complaints received from within PEI or from outside the province with regard to the provision of telemedicine services by any of its members. If the College receives a complaint regarding telemedicine services provided to a PEI resident by a physician licensed in another Canadian or foreign jurisdiction (and not licensed in PEI), it may forward the complaint to the appropriate medical licensing authority in that jurisdiction. Other Canadian and international jurisdictions may have different approaches toward complaints about telemedicine. Members are advised that when delivering telemedicine services into another jurisdiction, they may be held to the standards of that jurisdiction.</p> <p>Liability: The CPSPEI recommends that all physicians providing telemedicine services check with their insurers regarding professional liability coverage.</p>
<p>APPLICABLE LEGISLATION</p>	<p>Medical Act RSPEI 1988 48.(1) 63.(a)</p>
<p>APPROVED BY:</p>	<p>Council: September 27, 2016, November 30, 2016, January 16, 2017, April 2, 2020</p>
<p>REVISED:</p>	<p>April 16, 2020</p>