

# Telehealth consultation checklist

## Checklist



## Before the consultation

### Initial consideration

Your first consideration, before any telehealth consultation, should be whether telehealth is appropriate for the patient and the nature of the consultation you will be conducting. Familiarise yourself with the [Medical Board of Australia's Guidelines: Telehealth Consultations with Patients](#).

### Platform and privacy obligations

- Make sure your telehealth platform conforms to privacy obligations (see the Australian Government's Privacy checklist for telehealth services).

### Booking process and consent

During the booking process, conducted either by staff or online booking system:

- explain the limitations of telehealth compared to an in-person appointment
- confirm and document consent to telehealth
- confirm technology platform with patient
- request the patient be in a private setting with no distractions for the consultation
- confirm financial consent and advise of any out-of-pocket expenses
- confirm the patient's contact details.

### Preparation

As the treating practitioner:

- access the patient's medical records
- consider accessing the patient's MyHeathRecord if available and appropriate
- if you are not in your consulting rooms, consider using a virtual background to minimise distractions.

# The consultation

## At the start

- Introduce yourself.
- Explain the process and limitations of telehealth and confirm consent.
- Outline the consultation process.
- Explain what will happen if there is technical trouble such as connection loss.
- If bulk billing, explain the process and get agreement from your patient.

## Establish a professional, private environment

- Confirm that you are in a private setting.
- Confirm the patient is in a private setting where there will be no interruptions or distractions.
- Establish whether anyone else is present with the patient and document their details (name, relationship to patient)

## Rapport

One of the challenges during a telehealth consultation is building rapport so your patient feels comfortable, especially if they don't know you. Consider the following tips:

- Keep a professional appearance.
- Sit close to the camera so your patient can see your facial expressions.
- Try to maintain good eye contact and a constant gaze into the camera, rather than frequently looking away at your computer or notes.
- Consider starting with an unscripted, non-medical question such as "What would you be doing today if you weren't here?" to help build rapport with the patient while maintaining professional boundaries.
- Increase your focus on basic communication skills such as active listening, not interrupting your patient and repeating back what you have heard, especially if there is a delay caused by the connection.

## During the consultation

- Conduct the consultation in a way that reflects the standard of care expected in an in-person consultation.
- Increase your emphasis on history taking and ask additional questions to compensate for reduced visual and physical clues.
- Ask the patient to repeat information back to you in their own words to confirm their understanding.

## Physical examination

There are obvious limitations to telehealth in relation to physical examinations so:

- use tools and resources your patient has at home e.g. blood pressure or blood sugar monitoring systems
- think laterally about what information you can glean virtually e.g. functional assessments, information from the home environment
- recognise when your patient requires an in-person physical examination and support them to attend your clinic or be seen by another practitioner.

## Prescribing

When prescribing as part of a telehealth consultation it is important to note:

- You are authorised to prescribe in the state or territory in which you practise.
- If prescribing for a patient who is outside your state or territory, ensure you meet the requirements of a lawful prescription in the patient's state or territory.
- Check the patient's preferred pharmacy.
- If [prescribing drugs of dependence](#) check the Real Time Prescription Monitoring system in both your and (if possible) the patient's state or territory. Consider also contacting the [Prescription Shopping Information Service](#).
- If you don't have an existing clinical relationship with a patient then it is generally discouraged to prescribe drugs of dependence, unless there are exceptional circumstances.

# End of consultation

## General

- If a referral is needed, check if the patient has a preferred imaging centre or specialist.
- Agree with your patient on plans for treatment or follow-up appointments.
- Tell the patient how to get back in touch with you or another practitioner and, if needed, discuss what they should do if symptoms change, get worse or don't respond to treatment.

## Billings

- If bulk billing Medicare, make sure the patient has correctly assigned their benefits.
- If not bulk billing, confirm the out-of-pocket costs.

# After the consultation

## Documentation requirements

Documentation standards are the same for a telehealth consultation as an in person consultation. However, you do need to also document:

- what technology you used for the consultation (phone or video) and rationale
- whether there were any limitations to your assessment
- clinical reasoning, treatment and follow-up plans including if the patient needs to make an in-person appointment.

## Sharing with other practitioners

- If the patient is not a regular patient, notify their usual treating practitioner(s) of the consultation or changes in patient treatment or medication.

## Resources

The Royal Australian and New Zealand College of Psychiatrists – [Telehealth in psychiatry](#)

Medical Board of Australia – Guidelines: [Telehealth consultations with patients](#)

Australian Digital Health Agency – [Telehealth](#)

The Royal Australasian College of Physicians – [Telehealth: Guidelines and practical tips](#)