

# Utilising video technology for device follow up

Matt Swift

Lead Cardiac Physiologist CRM

# Background

## Remote Monitoring

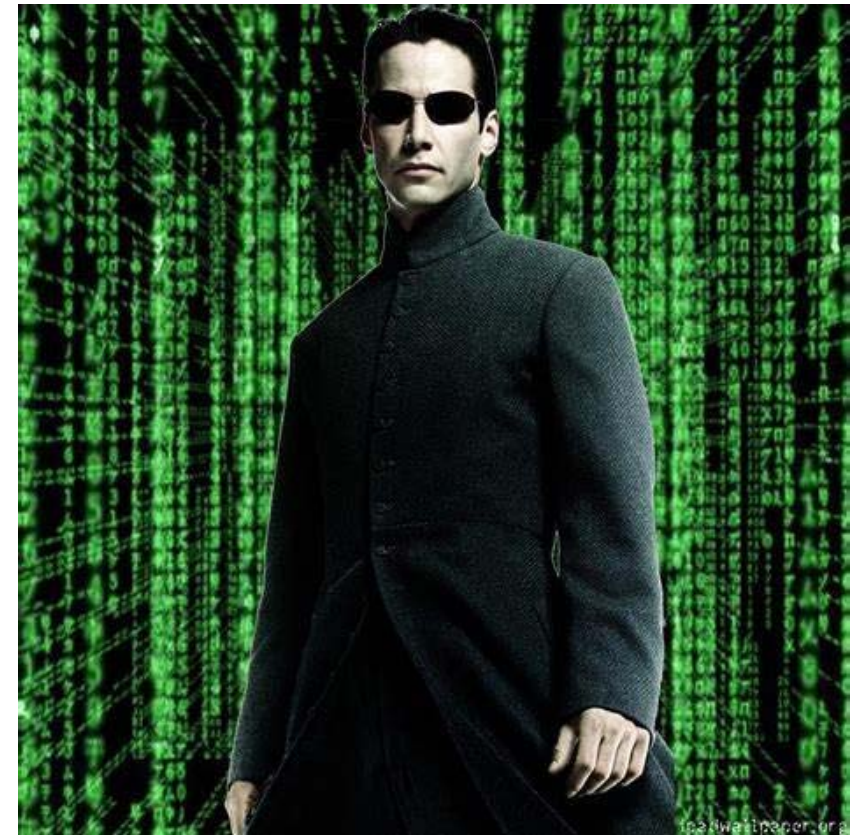
- Offered remote monitoring to all patients since 2010
- Currently we have >4000 patients enrolled in our RM service
- Since 2010 performed 30,000 remote device follow ups
- 2019-2020 FY 19,000- RM device alerts
- Pioneered WFH for physiologists
  - Since 2012



# Pre COVID-19 RM workflow

Treating the “numbers”

- Annual remote interrogations
- Device diagnostics checked
- Assess lead measurements
- Satisfactory
  - Letter to patient
  - Letter to GP
- Unsatisfactory
  - Patient to clinic to be assessed
- Emergency situations
  - Clinic to call patient



# COVID-19 Wave 1

April 2020

- **16 Device Implants**
  - 15 pacemakers
    - 13 Dual Chamber
    - 2 Single Chamber
  - 1 ICD (VDD DX)
- **485 Device Follow Ups**
  - 25 face to face
  - 456 Remote device follow ups
    - April 2019 491 (97% of 2019 capacity)



# Adaptation of RM service

“Necessity is the mother of invention”

- Assessment of wounds post implant
- Bring to clinic for symptom assessment
  - HF diagnostics
  - Palpitations
  - ?Chronotropic incompetence
- “Treat the patient not the numbers”
  - Reduce visits to GWH

Age group	Has access to the Internet via mobile phone
16-24	98%
25-34	96%
35-44	97%
45-54	95%
55-64	77%
65+	53%

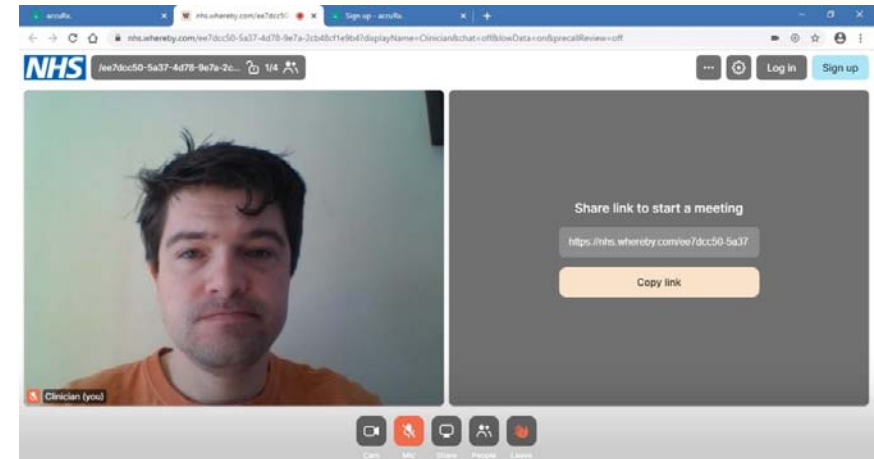
ONS,2019



# Wound Checks

## First Utilisation of Video Technology

- RM always given at implant
- Video consultation technology
  - AccuRx Fleming
  - DoctorDr
  - Screen patient at implant to assess ability to use video tech
    - Smart phone
    - Desktop
    - Family members IT
- Phone call, patient questioned on wound condition
  - Any concern send image via email



# Video Device Follow Up

Heart Failure/ Palpitations/ Rate Response

- Remote device interrogation
  - PIEGM
  - Diagnostics
  - Lead measurements
  - Battery
- Video Call
- Clinical History
  - More difficult not F2F
  - Systematic assessment of symptoms



# Video Device Follow Up

## Benefits for patients- Easy for staff

### ■ At home

- More relaxed atmosphere
  - Likely to be more open
- Family members often present
  - Not currently in clinic
  - Can give key information
- Easy access to medication lists
  - Most recent prescriptions
- No stress of travel to and from hospital
  - Large geographical area
  - Public Transport
- Protect patients and staff
  - COVID-19

<https://www.youtube.com/watch?v=eq33DYQpjSQ&feature=youtu.be>



# Tips for Video Consultation

Limited opportunities for patients to see healthcare staff

- Introductions
  - Dress appropriately (if WFH)
  - Introduce yourself
  - Explain why you are performing consult virtually
    - Gain consent
- Tips and tricks
  - Non verbal cues
  - Actively listen
  - Use silence



# Taking a clinical history

## Systematic Approach

- Primary Complaint
  - Onset
  - Precipitating and Relieving factors
  - Duration and Frequency
  - Patient Concerns
  - Summarise
- Systemic Enquiry
  - Refer- if another speciality
- PMH
- Medications History
- Family History
- Social History
  - Accommodation
  - Smoking
  - Occupation
  - Diet and exercise
- Summarise
  - Repeat salient points to patient
  - Thank the patient

# Summary

## Video device follow up

- Service modification created out of necessity by COVID-19
- Reduces hospital visits
  - COVID-19- risk
  - Environmental considerations
- Requires skills which may require further training for physiologists
  - Clinical history taking
  - Increased roles for CP
- Systematic approach is essential

