



Guideline

Patient – Physician Communication Guidelines Using Electronic Communication

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Written and verbal communications have traditionally been the primary method for communicating health information between health professionals and patients. Other viable methods have emerged as modes of communication. The use of e-mail has taken on increased significance as a way of clarifying instructions, providing information or to act as a written record.

Although the use of e-mail, computers, and the internet for communication purposes has been convenient and inexpensive, it has also created privacy, confidentiality and security issues.

- a. Phone
 - b. Fax
 - c. E-mail
 - d. Internet
 - e. Social Media
- a. **Phone calls:** There are no guidelines directing physicians to communicate with patients over the telephone. In fact, busy schedules often prevent physicians from phoning patients back during the work day. In some instances, a physician may prefer to discuss a medical situation with a patient in person rather than on the phone, in which case his/her medical assistant should make every effort to book a timely appointment. Since time spent on the phone talking to a patient is not an insured service, if there is to be a fee charged, the patient should be informed in advance of the conversation.
- b. **Fax:** Tips for Safeguarding Information When Faxing Policy and Procedures:
- Adopt a written policy on faxing personal information and personal health information and ensure that employees, including all new employees, are trained and regularly reminded of the policy. This policy should include the types of information that can be faxed by or to your organization.

- If possible, designate one employee to be responsible for sending and receiving personal information and personal health information by fax. Train that employee in proper procedures and ensure they are aware of the legal duty to protect the information.

(For further information re faxing, check the Office of the Information and Privacy Commissioner of Saskatchewan website: <http://www.oipc.sk.ca/Resources/Faxing%20PI%20and%20PHI%20-%20Safeguards%20and%20Responding%20to%20a%20Breach%202015.pdf>)

- c. **E-mail:** is a method of exchanging digital messages from an author to one or more recipients. Modern e-mail operates across the Internet or other computer networks.

The use of e-mail between physicians is becoming more common and a number of patients are expressing a strong interest in being able to communicate with their physicians in this way. Both physicians and patients should be aware of the legal risks of such a method of communication and agree to assume those risks.

Physicians must make every effort to ensure that information is sent to a confidential e-mail address specific to the patient (e.g. not a corporate address accessed by others in the patient's workplace).

Physicians must comply with the privacy requirement in Saskatchewan (see Office of the Information and Privacy Commissioner <http://www.oipc.sk.ca/>).

Physicians should consider getting a written form for patient consent to the use of e-mail communications. (Sample form is included on the Canadian Medical Protective Association website at https://www.cmpa-acpm.ca/documents/10179/301287261/com_15_consent_to_use_electronic_communication_form-e.pdf).

- d. **Internet:** is a global system of interconnected computer networks to serve billions of users worldwide. The internet is for those who want to read, want to learn more or find immediate answers to their questions.

Patients are turning to the internet to self-diagnose or learn more about their symptoms. They go to their physician to seek medical advice or to confirm their own suspicions. Better informed patients can present a challenge to physicians particularly when the internet information is incorrect.

Physicians can advise patients to supplement/re-orientate their knowledge base with reputable directed websites pertaining to their illness, e.g. for cancer patients: www.cancer.gov or www.nccn.org.

Some websites recommended for consumers by health publications are: <http://www.webmd.com/>, or www.emedicinehealth.com.

Best practices in the area of internet and electronic communications by physicians are evolving. Physicians are advised to stay abreast of current recommendations from the Canadian Medical Association (CMA) and the Canadian Medical Protection Association (CMPA).

CMA developed the country's first comprehensive guidelines to help physicians who want to communicate online with patients. (See "Physician Guidelines for Online Communication with Patients" at <http://policybase.cma.ca/dbtw-wpd/PolicyPDF/PD05-03.pdf>).

- e. **Social Media:** includes web-based and mobile technologies used to turn communication into interactive dialogue. Social media is used to connect individuals and offers opportunities for learning, information sharing, collaboration and networking. Current examples are: Facebook, Twitter, YouTube, blogs, podcasts, etc.

The rules and expectations that apply to you as a physician "offline", also apply in "online" social media spaces.

"When using the Internet for social networking, physicians should use privacy settings to safeguard personal information and content to the extent possible, but should realize that privacy settings are not absolute and that once on the Internet, content is likely there permanently. Thus, physicians should routinely monitor their own Internet presence to ensure that the personal and professional information on their own web sites and, to the extent possible, content posted about them by others, is accurate and appropriate." (Office of the Saskatchewan Information and Privacy Commissioner, January 2011 Newsletter)

Additional Resources

Canadian Medical Association - Physician Guidelines for Online Communication with Patients
<http://policybase.cma.ca/dbtw-wpd/PolicyPDF/PD05-03.pdf>

Canadian Medical Association - Social media and Canadian physicians: Issues and rules of engagement - <http://policybase.cma.ca/dbtw-wpd/Policypdf/PD12-03.pdf>