

Implementation of Telemedicine in an Outpatient Ostomy Clinic

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Introduction

- Telemedicine expands access to care and is convenient for patients.¹
- A meta-analysis found ostomy care provided through telemedicine reduced stoma-related complications.²
- Medicare reimbursement for telehealth visits is the same as in-person visits.³
- An academic medical center in the Midwest set a goal to increase accessibility through virtual visits. Ostomy patients were waiting up to four weeks for appointments due to limited clinic space; therefore, a half-day virtual clinic was proposed to improve access to ostomy care, as well as to meet the institution’s goal. Due to hospital demand, an inpatient ostomy APP was seeing an average of less than one patient per the proposed half day.

Methods

The half-day virtual clinic schedule allowed the outpatient APP to provide virtual visits outside of the space limitations of the clinic. During the trial, the inpatient APP transitioned to the outpatient clinic for in-person visits for the half-day.

Candidates for virtual appointments were patients who were scheduled for:

- Annual visits
- Visits for rashes
- Follow-up visits



Methods (cont.)

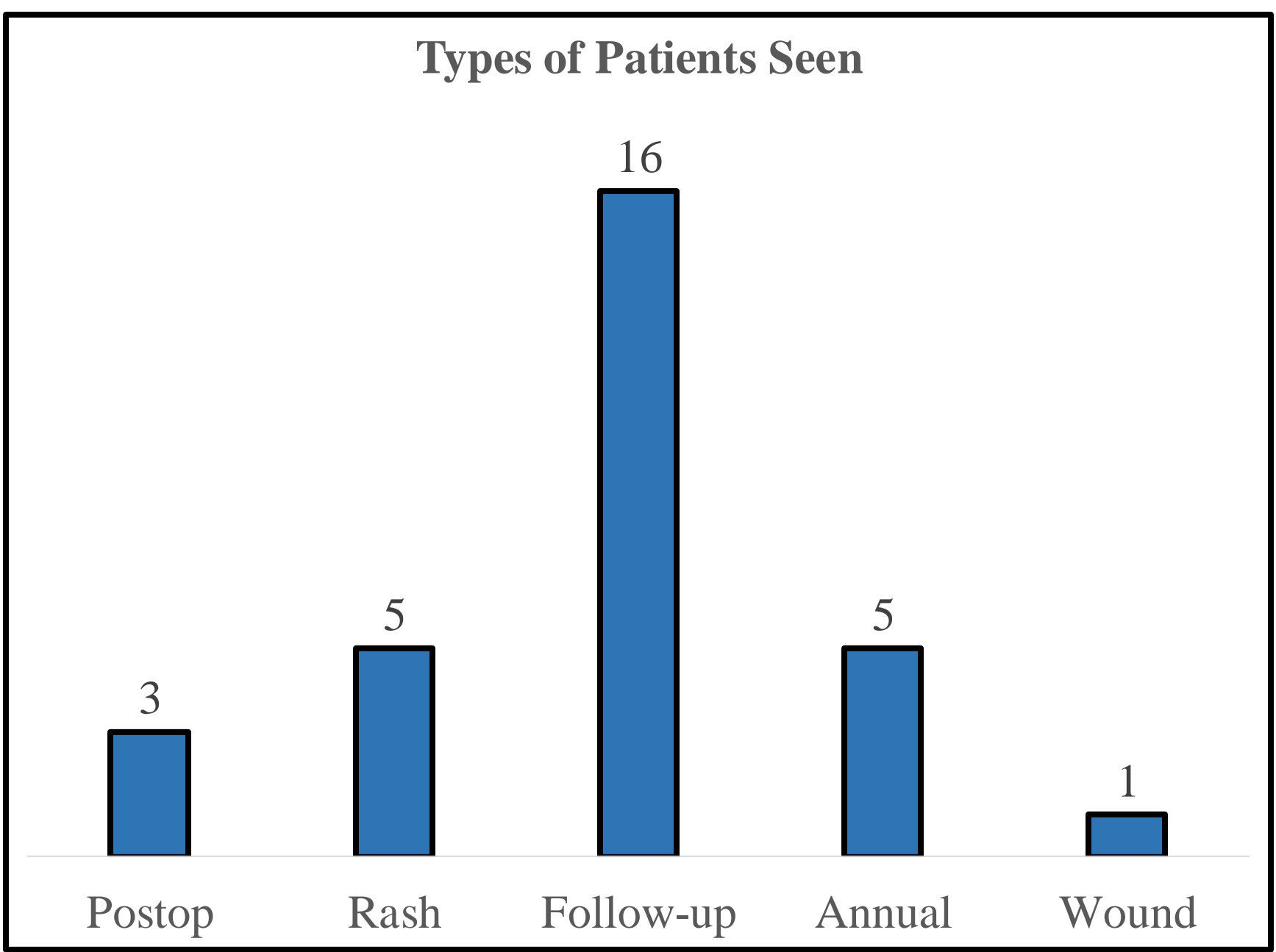
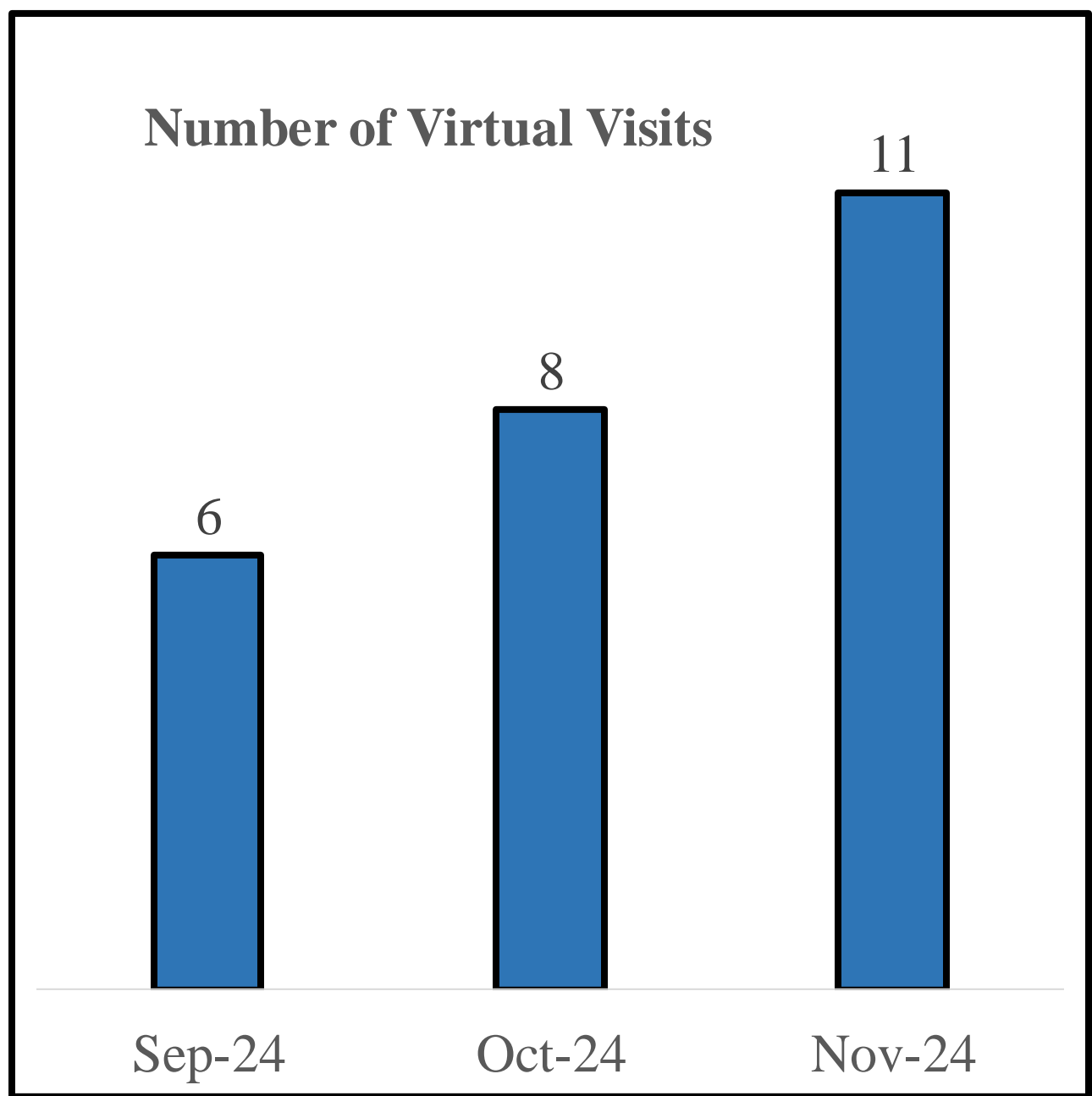
The process for virtual visits included:

- Prior to appointment
 - Support staff sent instructions for the visit by mail and through the electronic health record one to two weeks prior to the appointment
 - Support staff sent a measuring guide with the letter
 - Patients could send photos of the stoma with the measuring guide and the back of their used wafer through the patient portal
- During visit the provider
 - Conducted a review of systems
 - Reviewed previously sent photos or viewed patients changing the pouching system
 - Developed a plan of care
 - Discussed recommendations
- After appointment
 - The provider completed patient instructions
 - The provider sent a message for staff to order samples or ordered durable medical equipment
 - The provider sent a message for staff to schedule a follow-up appointment

References

1. Dhaliwal JK, Hall TD, LaRue JL, Maynard SE, Pierre PE, Bransby KA. Expansion of telehealth in primary care during the COVID-19 pandemic: benefits and barriers. *J Am Assoc Nurse Pract.* 2021;34(2):224-229. Published 2021 Jun 7. doi:10.1097/JXX.0000000000000626
2. Wei-Ying Z, Hui-Ren Z, Hai-Ping Y, Li-Li M. The effect of telemedicine on stoma-related complications in adults with enterostomy: A systematic review and meta-analysis. *Int Wound J.* 2024;21(1):e14572. doi:10.1111/iwj.14572
3. Medicare Telemedicine Health Care Provider Fact Sheet. Centers for Medicare & Medicaid Services. March 17, 2020. Accessed December 31, 2024. <https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>

Results



During the twelve-week trial, patients scheduled in both the virtual and in-person half day clinics increased access to the clinic by 10%. Of the virtual visits, 91% were successfully completed. Reasons for non-completion (9%) were patient traveling out of state at their appointment time.

Discussion

Future instructions for visits can clarify the need for in state attendance during the visit. With the success of the trial, the half-day virtual clinic schedule became permanent. Virtual visits are an effective way to provide care to many ostomy patients.