Supplemental Digital Appendix 1

Pre-and Post-Test Questions Used in a Required Third-Year Telehealth Pilot Course, Uniformed Services University for the Health Sciences, 2018

1. Which of the following are true of the current telehealth landscape in the Department of Defense (DoD)? Select all that apply.
   a. Tele-Behavioral Health constitutes the majority of telehealth encounters
   b. DoD is the main facilitator and regulator of telehealth in the federal sphere
   c. Tele-Behavioral Health is growing in deployed settings
   d. The DoD uses teleradiology extensively

2. Telehealth supports a patient centered-care model by removing _____. Select all that apply.
   a. Stresses of traveling to an appointment
   b. Required paperwork for physician encounters
   c. The requirement for standardized technology
   d. The need to wait in waiting rooms

3. The benefits of Telehealth to healthcare systems and providers include _____. Select all that apply.
   a. Allowing for greater flexibility in scheduling
   b. Reducing travel pay for providers and patients
   c. Reducing paperwork for insurance claims
   d. Facilitating patient follow up

4. A common myth(s) regarding telehealth is that it is _____. Select all that apply.
   a. Expensive
   b. Not secure
   c. Inconvenient
   d. Impersonal

5. What factors should a provider consider when establishing an effective provider-patient relationship via telehealth?
   a. Patient's preferred language, familiarity with technology, and access to healthcare emergency and other resources in his/her community
   b. Patient's preferred language, access to healthcare resources in his/her community, and how to contact him/her on social media
   c. How to contact him/her on social media, what the weather is like in his/her location, and his/her military rank
   d. Who in his/her location a patient can go to in the event of an emergency, whether a patient smells like alcohol, and patient's familiarity with technology

6. Which of the following is NOT helpful in overcoming distance-related challenges to an effective provider-patient relationship?
   a. Knowing a bit about weather, events and points of pride in the patient's location
   b. Knowing a patient's Facebook or Instagram name
   c. Obtaining details on the patient's presentation from personnel at the patient's location in the absence of "smell-o-vision"
   d. Knowing whether there are sufficient opportunities for the patient to engage confidentially in a 12-step group in his/her town

7. What functions might a telepresenter perform during a telehealth encounter?
   a. Take vital signs and glucose reading
   b. Provide the doctor with information regarding the patient's presentation in the office that the doctor cannot otherwise obtain
   c. Activate safety protocol at clinic if needed
   d. All of the above

8. What are the three primary changes made through legislation and policy over the past 5+ years that have helped to address barriers to telehealth expansion in the DoD?
   a. Allowing providers to practice from their homes; Deregulation of payment methods and incentives for use of telehealth in Purchased Care; and Privileging by proxy
   b. Telehealth to the patient's location; Privileging by proxy; and Deregulation of payment methods and incentives for use of telehealth in Purchased Care
   c. Cross-state licensure; Telehealth to the patient's location; and Allowing providers to practice from their homes
   d. Privileging by proxy; Expansion of cross-state licensure; and telehealth to the patient's location

9. Which of the following is NOT a requirement of the National Defense Authorization Act of 2017?
   a. There must be parity in coverage for services provided in person and by telehealth
   b. Telehealth must be available for purposes of diagnosis, intervention, health assessments, and supervision
   c. A provider must be explicitly privileged by the facility in which he or she is providing service
   d. Telehealth must include synchronous, asynchronous, and remote monitoring applications
   e. Telehealth must be available for primary, specialty, urgent, and behavioral health care

10. Prior to each telehealth encounter, providers should _____. Select all that apply.
    a. Check and practice with the equipment being used
    b. Ensure that they have sent all patient documents to the person running the telehealth visit at the patient end in time for the documents to be reviewed
    c. Dress appropriately for camera (no prints, bright colors, loud jewelry, revealing tops, etc.)
    d. Inform others that a telehealth visit is taking place and invite them to observe
    e. Look the patient up online to gather information about them from social media
    f. Check for external sounds and ensure windows are closed

11. Which DoD telehealth program or capability is being described below?
    Provides a spectrum of on-demand medical consultation services to caregivers in operational settings; Includes asynchronous and synchronous modalities; Connects requestors to the appropriate medical provider(s).

    a. Tele-Health In a Bag (THIAB) and Transportable Exam Station (TES)
    b. The Virtual Integrated Patient Readiness and Remote Care Clinic (VIPPR)
    c. CENTCOM Tele-Behavioral Health
    d. Advanced Virtual Support to Special Operations (ADVISOR)
    e. PATH (Pacific Asynchronous Telehealth) and PATH-HELP

12. Which of the following is NOT one of the possible ethical pitfalls providers should be aware of when practicing telehealth?
    a. Erosion of the patient-doctor relationship
    b. Threats to patient privacy
    c. Privileging by Proxy
    d. Forcing one-size fits all implementations
    e. Temptation to assume that new technology must be effective

13. All of the following are positive telehealth behaviors except:
    a. Nodding your head for encouragement
    b. Laughing
    c. Leaning into the camera
    d. Clear beginning, middle, and end

14. Providers should be mindful of which of the following during a telehealth encounter?
    a. Angle of the camera
    b. Room lighting
    c. Mute button
    d. Physical surroundings
    e. Technology limitations
    f. All of the above

15. Identify the four phases to a successful TH visit in the correct order.
    a. Beginning, Introduction, Conducting, Wrap-Up
    b. Introduction, Conducting, Conclusion, Debrief
    c. Preparing, Beginning, Conducting, Wrap-up
    d. Preparing, Introduction, Conducting, Debrief

16. Which issues should a provider consider as a practitioner in the age of technology and social media?
    a. Self-disclosure online is almost inevitable
    b. Technology increases the potential for multiple relationships.
    c. The potential positive effect of 'friending' a patient on social media on the doctor-patient relationship.
    d. a & b

17. Which of the following should NOT be included on an informed consent form?
    a. Explanation of the telehealth process
    b. Explanation of the risks and benefits of telehealth services
    c. Instructions for connecting to the technology being used
    d. Available alternatives

18. You are conducting an assessment via telehealth with a patient in his home. What steps should you take to ensure you are meeting privacy and security standards?
    a. Ask a colleague to observe the interview to ensure you are following best practices
    b. Put on a headset
    c. Ask the patient to confirm that he has closed doors and windows, pulled drapes/blinds, and that no one is sitting off camera
    d. All of the above

19. Which current or future DoD telehealth capability is being described below?
    Provide enterprise-wide integration of Virtual health encounters; Coordinate with providers across the enterprise to connect patients in remote locations
    a. Virtual Video Visits (V3)
    b. Connected Corpsmen in the Community Pilot
    c. Virtual Readiness Clinics (VIPER)
    d. Virtual Medical Center (MEDCEN)
    e. Tele-Imaging Systems

20. Which of the following is NOT a potential advantage of telemedicine over the traditional deployment mindset?
    a. Less casualty/patient movement
    b. Smaller physical footprint of medical personnel
    c. Simple and requires little training
    d. Equal or improved access to care providers

21. Which simulation role is being described below?
    An individual with a clinical background; Must be available at the originating site to present the patient, manage the cameras and perform any hands-on activities; May sometimes provide information about the patient to the provider that the provider could not otherwise obtain

    a. Clinic manager
    b. IT support
    c. Telepresenter
    d. Receptionist/scheduler

Supplemental Digital Appendix 2

Mock Patient Scenario Used for a Videoconference-Based Telehealth History and Physical Encounter During a Required Telehealth Pilot Course, Uniformed Services University for the Health Sciences, 2018

SCENARIO #1:

Vital Sign	Measurement
Blood Pressure	118/76
Pulse	85
Respirations	16
Temperature	98.7
Pulse Oxygenation	100% RA

Physical Examination	Description
General	Alert, oriented in no acute distress
HEENT	No obvious lesions to head or face, extraocular muscles are intact, no external lesions to the ears, nose. Oropharynx is clear and without lesions
Psychiatric	Appropriate in mood and conduct. Able to provide consent for TH previously and confirmed this today
Dermatology Exam	Patient will show rash photograph across videoconference upon request
Review of Systems	No fever, chills, nausea, vomiting, additional rashes, congestion, runny nose, headache, cough, shortness of breath, diarrhea, constipation, no pain

Medical History	Description
Medical Conditions	Diabetes Mellitus Hypertension
Allergies	No known drug allergies
Current Medications	Metformin 1500 mg daily, Aspirin 81 mg daily, Lisinopril 10 mg daily

Medical History	Description
	No new changes in years
Surgical History	Wisdom teeth removed at age 17 Appendectomy at age 28
Family History	No history of dermatologic conditions; mother died age 84 of MI; father died at age 82 of MI
Vaccine History	Flu shot 3 months ago, never had shingles vaccines, all others up-to-date

PRESENTING SITUATION

- **Chief Complaint:** Rash on chest wall
- **History of Present Illness:** The patient is a 65-year-old Caucasian male who complains of a painful itchy rash to the left side of his chest wall of 24 hours duration. Prior to this development of the rash, the patient had noticed a runny nose, congestion and headache for about 5 days. Those symptoms resolved and then he noticed some chest wall irritation for a day and then the rash developed. He has not had a rash like this before; he tried no treatments, has no other symptoms at present and is otherwise in his usual state of health without complaint.

Supplemental Digital Appendix 3

Mock Patient Scenario Used for a Videoconference-Based Telehealth History and Physical Encounter During a Required Telehealth Pilot Course, Uniformed Services University for the Health Sciences, 2018

SCENARIO #2:

Vital Sign	Measurement
Blood Pressure	120/60
Pulse	65
Respirations	16
Temperature	98.4
Glucose	210mg/dl

Medical History	Description
Current Medications	Metformin 1500 mg Over the Counter Multi-vitamins
Conditions	Diabetes Mellitus
Allergies	No known drug allergies
Other	No history of head injuries or seizures No reported history of behavioral health concerns or treatment

Habits	Description
Alcohol	Social drinker, 3-4 drinks per outing, 1-3 times per month when getting together with friends or coworkers
Tobacco	None
Drugs	Marijuana in college, but no longer using
Health Behaviors	Generally healthy diet with no fast food intake. Exercises 3-4 times per week, runs 15-20 miles per week

Habits	Description
Sexual History	Monogamous

PRESENTING SITUATION

- Dr. "Smith" is a primary care physician. This patient is a 44-year-old Caucasian female and the spouse who has two school-aged children.
- Dr. "Smith" is treating this patient for diabetes mellitus with the assistance of remote health-monitoring equipment. The patient's condition has been very stable for two years. However, the Nurse Care Manager who monitors the patient's blood glucose and vital signs from the clinic has advised Dr. "Smith" that the patient's blood glucose level has become somewhat less stable over the last two days. Dr. "Smith" decides to assess the patient through telemedicine to determine what may be impacting her glucose level and whether they need to see them in person. The patient prefers to be seen by telemedicine whenever possible to avoid taking time off from their demanding job to travel.