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Ethical Considerations in Telemedicine in Orthopaedic Surgery

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We read the recently published article “Telemedicine in Orthopaedic Surgery” (1) and thank the author for the extensive contribution in this new emerging field of medicine.

Jerome et al (2) had made remarkable observations from their survey involving 100 Orthopaedics surgeons from 50 countries during the early and mid-lockdown phase of corona virus disease. Fifty-nine percent of the surgeons favored virtual webinars and limited meetings, and 12% favored webinars only. Interestingly, 23% of the surgeons prefer normal meetings at the conference venues because they take pleasure in face-to-face meet and like the real-time happenings. Zoom Tm (66%), webinars (40%), Facetime (16%), Skype Tm (20%), Google Chat/Duo Tm (17%), WhatsApp videos Tm, Microsoft Teams Tm, Hospital software, and Halo app were the preferred tools for their virtual meetings during the lockdown.

There are many advantages in the virtual learning through webinars, meetings, and online lectures. It helps participants to record, reproduce the events, access and share images, and gives great comfort in attending during the work and other schedules. (3) It has no personal face-to-face contact, economically productive, and more viable than the real conferences. (4) Video-based education promotes surgical training by providing audiovisual contents on indications, preoperative work-up, OR settings, operative techniques, and postoperative care. (5)

Jerome et al (2) noted that teleconsultation and virtual meetings have been much improvised to provide better health care, but the physician–patient relationship which has been the existing norm for millennia, such as meet and greet, gentle and tender examinations, and shared decision-making, seems to have vanished in the COVID-19 era.

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References


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