Providing patient care remotely in a pandemic

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Principle IX of the AMA Principles of Medical Ethics provides that physicians should “[s]upport access to care for all people.” In a pandemic, offering health care services and information remotely via telecommunications technologies—whether phone, email, Web or social media—can play a significant role in connecting patients to care. At this same time, it can help protect patients, the public and health care personnel. The Code of Medical Ethics offers guidance for doing so responsibly in Opinion 1.2.12, “Ethical Practice in Telemedicine.

As Opinion 1.2.12 notes, remote interactions between patient and physician can range from providing general information anonymously on a health-related website to providing clinical care through via telemedicine. Physicians must uphold their fiduciary obligations to patients across that continuum. When they provide health information, they must ensure that the information they provide (or that is attributed to them) is objective and accurate. When patient information is transmitted, physicians must protect the security and integrity of that information at the patient end, during transmission and among all health care personnel who participate in the interaction.

Physicians who provide services remotely must be proficient in whatever technologies they use and, if they aren’t the patient’s primary care physician, have a responsibility to see that information from the encounter is conveyed to the primary care physician. They should be prepared to advise remote patients about how and where to arrange for needed care when follow-up is indicated.

To provide clinical care remotely, physicians must take appropriate steps to overcome the limitations of whatever technology they’re using. They must ensure that they have the information they need to make well-grounded clinical recommendations—for example, through digital health applications that reliably monitor for monitoring vital signs.

When carrying out a diagnostic evaluation or prescribing medication, a physician conducting a remote interaction should:

- Verify the patient’s identity
- Confirm that the remote interaction is appropriate to the patient’s situation and medical needs
- Write any prescriptions in keeping with best practice guidelines and formulary restrictions (and in keeping with ethics guidance on prudent stewardship)

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Document the clinical evaluation and prescription, as well as any instructions given to the patient.

In circumstances such as a pandemic when remote care is intended to address urgent need, there is a risk that it can also create or exacerbate existing disparities in health care, particularly for patients who do not have primary care physicians. Opinion 8.5 of the Code addresses issues of disparity, reminding physicians that they are “ethically are called on to provide the same quality of care to all patients without regard to medically irrelevant personal characteristics.”

**Additional ethics guidance in a pandemic**

The AMA offers an overview of foundational guidance regarding medical ethics for health care professionals and institutions responding to the COVID-19 pandemic.


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