

The Road to a Teleaudiology Program - Bumpy, But Worth the Journey

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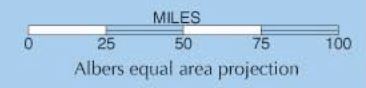
Why try Teleaudiology?

1 – 3 – 6 Data for the counties included in the Teleaudiology Project

- Fewer babies are diagnosed by 3 months of age
- Higher lost to follow up rate than the rest of the state

Many babies in some areas are going out of state for services

Way of the future!





NC Marshland

Characteristics of These Areas

Extremely rural

High percentage of the population is below poverty

The 17 infant diagnostic sites are not easily accessible

- 5 hours drive time one-way

- Involve taking a ferry



Ferry Announcements

Monday, September 19, 2011: CEDAR ISLAND-
OCRACOE ROUTE WILL MISS TWO RUNS WEDNESDAY

Sunday, September 18, 2011: CURRITUCK-KNOTTS
ISLAND FERRY SUSPENDED DUE TO LOW WATER

Monday, August 15, 2011: SWAN QUARTER-OCRACOE
FERRY ROUTE TO RUN AMENDED SCHEDULE TUESDAY
AND WEDNESDAY

Northeastern Counties

Most families from northeastern counties are going to Virginia for diagnostics

Medicaid coverage

Continuity of care

Tracking issues

Our Teleaudiology Project Goals

To provide infant diagnostic evaluations in rural eastern and southern counties

To establish a coordinated system for the delivery of audiological evaluations for infants whose families experience economic and geographic barriers to service

What We Want to Accomplish

Decrease drive time for families to no more than 2 hours

Increase the number of children diagnosed by 3 months

Decrease LTFU

Preparation Process

Establish a partnership

Develop a contract

Purchase equipment

Develop protocols, guidelines and sample scripts

Approval from NC Board of Examiners for SLPs and Audiologists

Ensure training

Visit sites to get “buy in”

Establish a Partnership

EHDI Program

The money

An audiologist for pilot project

Babies

not currently being diagnosed by 3 months

East Carolina University (ECU)

Established telemedicine program

Audiologist experienced doing infant diagnostics

Interest

Develop a Contract with ECU

Department of Communication Sciences

Protocols for audiological evaluation

Obtain sanction from the NC Board of Examiners for Audiologists

Provide diagnostic evals via telemedicine system

Telemedicine Center

Technical support

Training

Scheduling

Purchase Equipment

Audiological Equipment

Diagnostic ABR

Diagnostic OAE

1000 Hz Tympanometer

Match what ECU would be using

Portability

Develop Protocols

Audiological

Telemedicine

Teleaudiology Intake

From Rescreen to Diagnostic

Q & A sheet for parents

Teleaudiology Request Form

Checklist

Approval from NC Board of Examiners

ECU Contract

Public Hearing – developing rules for tele-practice

Protocols developed

Chair of ECU Dept. of Communication Sciences

Training

Hospitals

Audiologists with the child and at ECU

Telemedicine equipment

Teleaudiology site coordinators

Remote Site Visits

Check equipment

Introduce audiologist on-site

Work out site – specific details

Credentialing

Preparation Process

Establish a partnership

Develop a contract

Purchase equipment

Develop protocols, guidelines and sample scripts

Approval from NC Board of Examiners for SLPs and Audiologists

Ensure training

Visit sites to get “buy in”



First Appointment

February 1, 2011

About 9 months later than we had hoped

Telemedicine equipment didn't connect

OAE and tympanometry

Lessons Learned

Everything will take more time than you expect

Work directly with the person involved

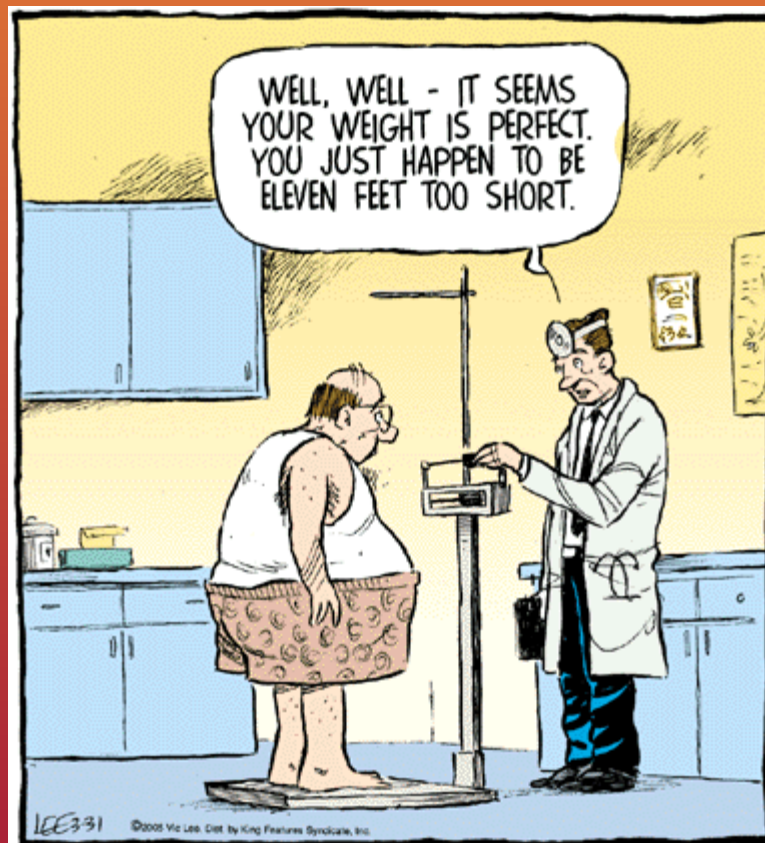
Protocols evolve as the program develops

Need is not as great as it appears on paper

- Babies with multiple concerns

- Established patterns of care

The non-technical part is generally the most challenging



Future Plans

New site in Robeson County

Determining sustainability

Billing

Non-audiologists for the remote sites

Grad students?

Hospital personnel?

ECU Telehealth Mission

Improve health care quality & access by appropriate application of health information & communications technologies and practices



*in Eastern
Carolina*



across our nation



*Dr. Dawd Siraj with John Hopkins
University connecting to Ethiopia*

*and outreach to other nations
worldwide.*

Current ECU telehealth applications

- **Teleconsultation/Specialist Referral Services**

- patient accompanied by a presenter who's at a clinical site equipped with peripherals collaborates with a MD or other consultant at a center of medical expertise

- **Distance learning and distance education**

- lecturer or instructor who delivers presentation materials to multiple locations for courses, grand rounds, or continuing education, may need to support student/participant Q&A. May be focused on adult health education/health literacy.

- **Multi-specialty health care collaboration**

- subspecialists at multiple locations collaborating on single case or groups of cases, e.g. tumor board, to discuss treatment options; physician to physician collaboration

- **Patient interview/follow-up/compliance/education**

- direct communication with a patient and/or care giver in situ (e.g. home care) for following up on problems related to a known diagnosis, ascertaining compliance with treatment plans, and/or patient education

- **Meetings/Administrative**

What is telemedicine?

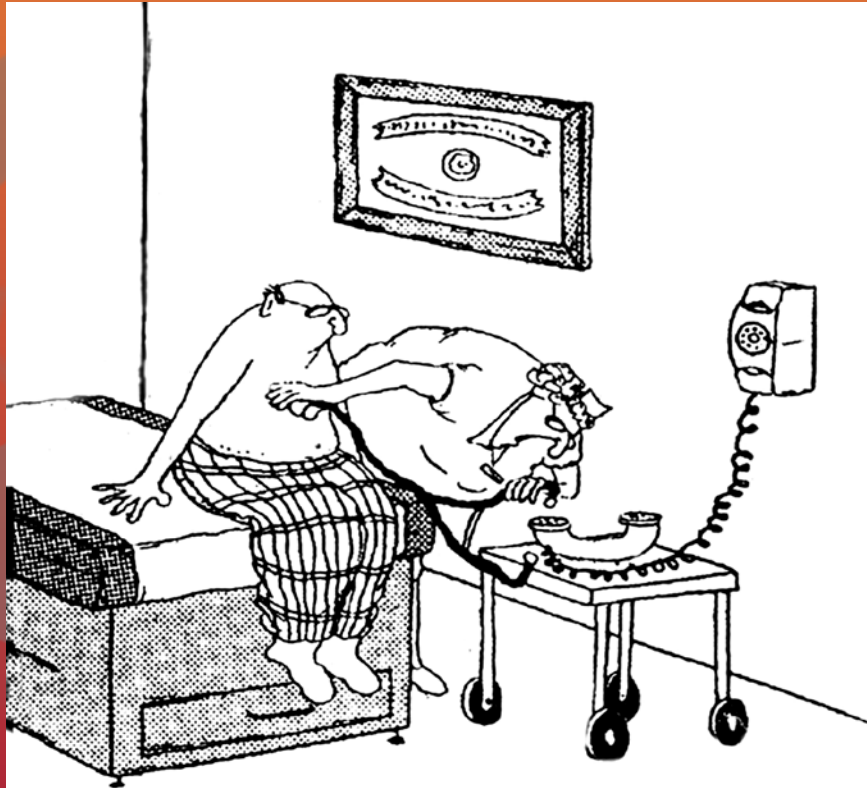
Telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve patients' health status. Closely associated with telemedicine is the term "telehealth," which is often used to encompass a broader definition of remote healthcare that does not always involve clinical services.

Videoconferencing, transmission of still images, e-health including patient portals, remote monitoring of vital signs, continuing medical education and nursing call centers are all considered part of telemedicine and telehealth.

*Extracted from CMS website and the
American Telemedicine Association
2010*

Telemedicine is not a medical specialty

ECU Telemedicine History



“Go ahead and tee off. Then I want you to listen to this wheezing”

- First consults with State Prison in 1992 – Consult # 00001: Vascular surgery
- Expansion of existing distance education network to cover residency program and first clinical rooms in rural hospitals -1994

ECU Telemedicine history

Research & Development

- “Tele” diagnostic tools
- Physician work stations – from home to office



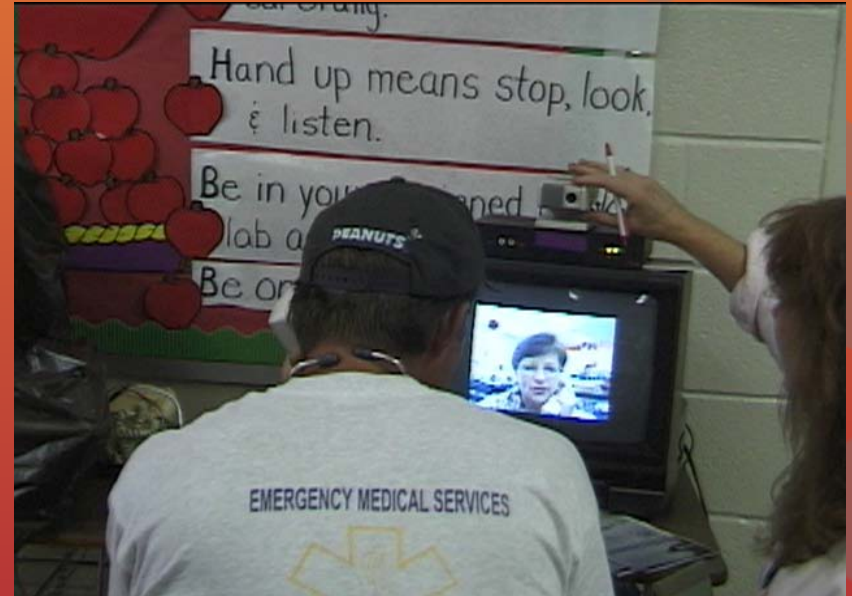
- Technical interface development for IP technologies with video tools - WFU/ECU – IP stethoscope
- Development of requirements for distribution of specialty care- dual inputs- EMG audio/video (and now Audiology)
- Telecommunications varieties, wireless, cable, cell, etc.

ECU Telemedicine History

- Established Advanced Telemedicine Training with more than 600 attendees representing 28 countries since 1997
- Awarded “Center of Excellence” status by University of North Carolina General Administration in 1999, renewed 2004 & 2009

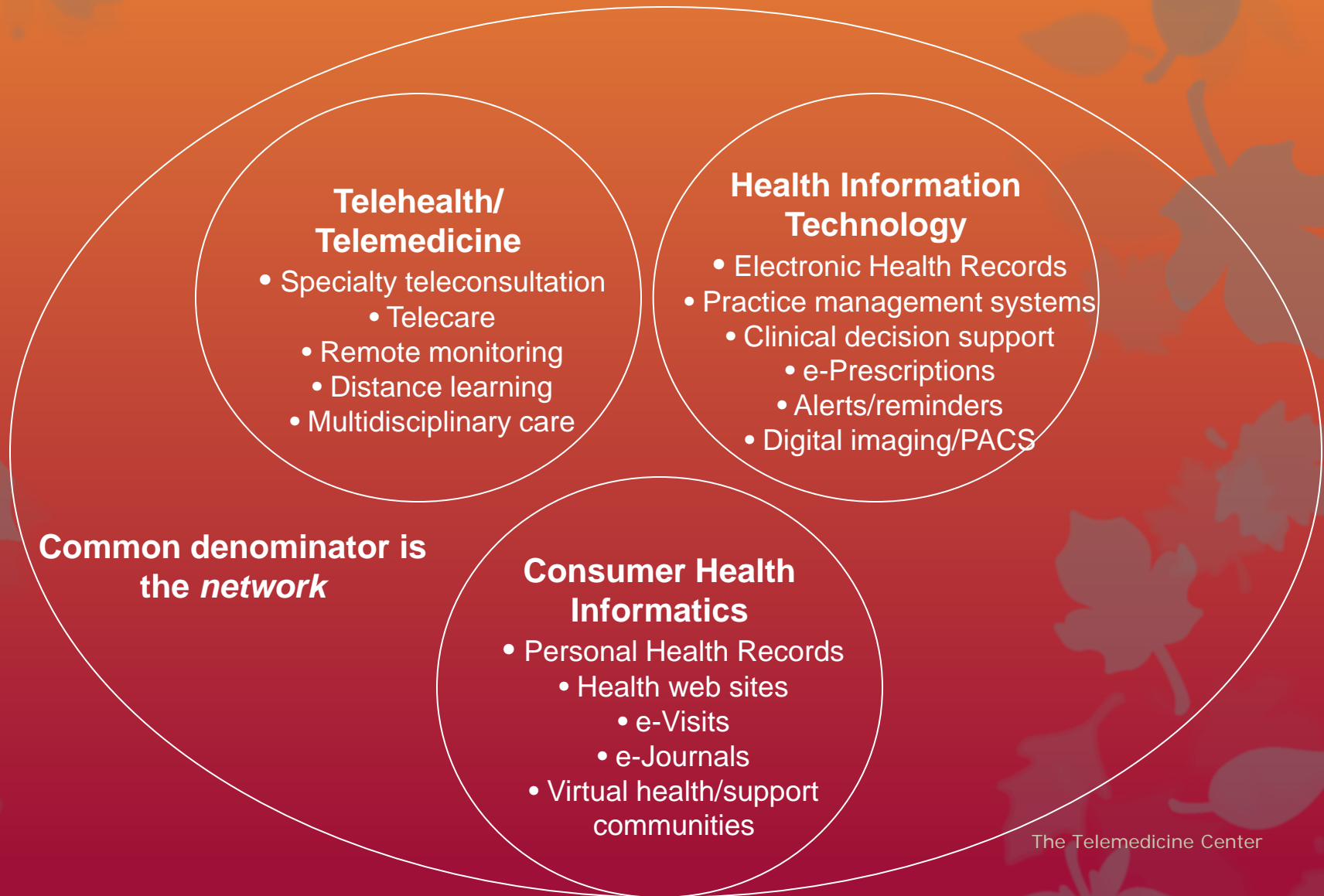


ECU Telemedicine History



- Research in Disaster Relief and Bioterrorism Exercises since 1998
- Flood waters consume Eastern North Carolina homes and businesses in 1999

Connected health?



Basic Telemedicine Types

- **Interactive** (Synchronous)

- Two way video, real time
- high-bandwidth telecommunication



- **Store and Forward** (Asynchronous)

- Images, audio or video files stored and transmitted, like e-mail, usually not real time
- lower bandwidth telecommunication

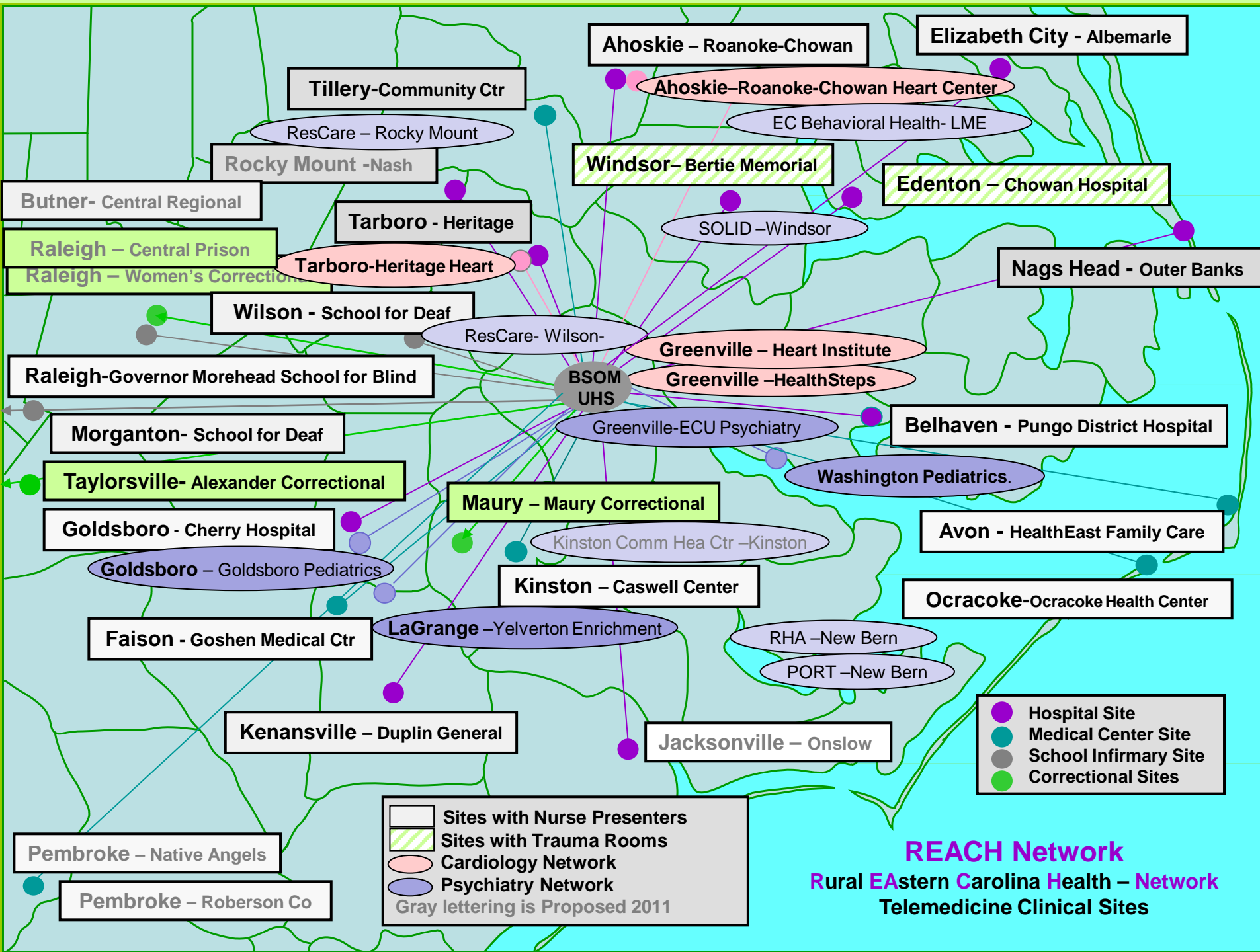


Typical patient site

- Medical Specialty Driven
- Additional switch or inputs for video sources or *tools*
 - Otoscope
 - Derm camera
 - Ultrasound, other aux.
- Stethoscope
- PC interface for imaging storage or sharing



Robert Hoyer, MD Dept of Pediatrics and resident at School for the Deaf in Wilson, NC residency school



IP advantages

- IP already part of your existing network using HIPAA protocol
- Can serve multiple applications
 - Electronic medical record
 - Internet interface – E-prescribing, medical info transfer
 - Personal workplace
 - E-mail
 - Telemedicine with encryption within VC unit/software
- Allows use of varying types of internet/telecom providers



Dr. Mariavittoria Pitzalis connects from her office to outpatient clinic in regional Cardiology Rehabilitation Center.

The Telemedicine Center

New mobile Models



ECU HD unit 2007

- HD codec, camera, and display
- Cart allows adjusting heights
- Stereo Microphone
- Increased Audio Frequency range (up to 22kHz)
- UPS
- Mobile
- Network/Power connectivity
- Video instruments
 - Interoperability?
- Electronic stethoscope
- Video switcher for Auxiliary inputs including ultrasound
- Content Sharing
- Multipoint

ECU Provider Technical Configuration



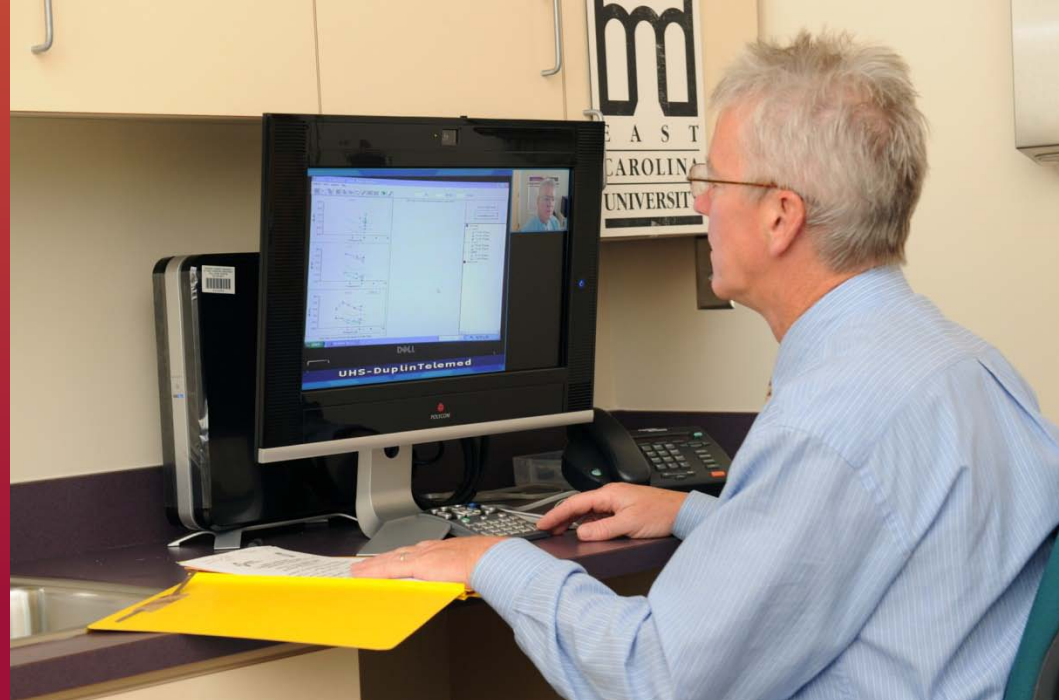
Dr. Andy Stuart talks with Mother and Audiologist in Elizabeth City

The Telemedicine Center

- Polycom HDX with document sharing
- Pan/Zoom/Tilt camera w/far-end control in Patient Room
- PIP layout control
- Directory Dialed
- Up to 6M calls
- Mobile desktop capability
- Telemed unit also used for Distance Educ
- Dual audio/mic

Patient End Units

- High Definition codec/camera with PTZ capability
- Mobile cart allows adjusting heights on a small footprint
- AES encryption for HIPAA compliancy;
- Video switcher for Auxiliary inputs including ultrasound
- Content Sharing with laptop/ audiology test equipment
- UPS; provisioned for wireless
- Network/Power connectivity



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