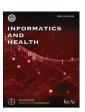
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## Nursing in the Digital Age: Harnessing telemedicine for enhanced patient care

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#### ABSTRACT

*Background:* Telemedicine has emerged as a transformative force in contemporary healthcare, reshaping nursing practice across various specialties. This narrative review explored the role, challenges, and ethical considerations associated with telemedicine in nursing practice. Also, it emphasizes telemedicine's impact on patient care, the evolution of nursing workflows, and future directions for implementation.

Method: A comprehensive narrative review was conducted, drawing upon primary research articles, systematic reviews, and policy documents published between 2010 and 2023. The search was carried out using electronic databases, including PubMed, ScienceDirect, CINAHL, and Google Scholar, employing keywords such as "telemedicine," "nursing practice," "patient care," and "ethical considerations." Eligible studies were critically appraised for relevance and rigor. Data synthesis included the identification of key themes, trends, and exemplary instances of telemedicine utilization in nursing practice.

Results: The review revealed a multifaceted role of telemedicine in nursing practice. Teletriage and remote patient monitoring were instrumental in reducing emergency department overcrowding and improving patient triage accuracy. Teleconsultations and virtual visits facilitated patient-provider interactions, while telepsychiatry addressed the growing demand for mental health support. Tele-education emerged as a vital tool for ongoing professional development among nurses. Moreover, telemedicine effectively reached rural and underserved populations, addressing healthcare disparities. Ethical considerations, such as patient privacy, informed consent, and data security, emerged as significant challenges in telemedicine.

Conclusions: As telemedicine continues to evolve, nurses should remain adaptable, actively engaging with emerging technologies and interdisciplinary teams. Furthermore, healthcare organizations, policymakers, and nursing associations/regulatory bodies should collaborate to establish clear ethical and legal guidelines. These efforts will ensure the continued growth of telemedicine in nursing practice, ultimately enhancing patient outcomes and expanding access to quality healthcare services.

#### 1. Introduction

Telemedicine, a technology-driven approach to delivering health-care services remotely, has emerged as a transformative force in modern healthcare.  $^{125}$  With advancements in digital technology and the

increasing demand for accessible and cost-effective healthcare, telemedicine has witnessed significant adoption across various medical disciplines. Among these, nursing practice stands at the forefront of embracing telemedicine's potential to enhance patient care, improve health outcomes, and optimize healthcare delivery. <sup>104</sup>

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The concept of telemedicine dates back to the early 20th century when radio and telephone technologies were initially used for medical consultations. However, it was not until the late 20th and early 21st centuries that significant advancements in telecommunications and digital technology propelled telemedicine to the forefront of healthcare innovation. The advent of high-speed internet, mobile devices, wearable sensors, and secure data transmission enabled real-time communication between healthcare providers and patients regardless of geographical barriers.  $^{6,14,29}$ 

Telemedicine has been reported to be a game-changer in healthcare delivery, especially in regions with limited access to medical facilities. <sup>116</sup> By leveraging telecommunication technologies, healthcare providers can remotely assess, diagnose, and treat patients, overcoming geographical challenges and reducing the burden on physical healthcare infrastructure. <sup>116</sup> Additionally, telemedicine has been instrumental in improving care coordination, empowering patients to manage their health proactively, and reducing the strain on emergency departments through teletriage services. <sup>135,54</sup>

Nursing, as a core component of the healthcare system, has embraced telemedicine to augment its roles and responsibilities. <sup>128</sup> Telemedicine applications in nursing practice are diverse and span various specialties. Teletriage services enable nurses to remotely assess patients' conditions and direct them to appropriate levels of care. <sup>69</sup> Teleconsultations facilitate virtual visits, allowing nurses to interact with patients in real time, address concerns, and provide expert advice without requiring physical presence. <sup>93</sup> Telepsychiatry has also gained traction, extending mental health support to individuals in remote areas or facing mobility constraints.

Furthermore, teleeducation and professional development have enabled nurses to access continuous training, ensuring their skills remain up-to-date with rapidly evolving medical practices.  $^{95}$  Telemedicine initiatives tailored to rural and underserved populations have brought healthcare services to regions where access to medical facilities is limited  $^{34,116}$ , thus reducing health disparities and improving overall healthcare equity.  $^{119}$ 

The global COVID-19 pandemic served as a catalyst for the widespread adoption of telemedicine across all healthcare sectors, including nursing practice. <sup>11</sup> With social distancing measures in place, telemedicine emerged as a vital means of maintaining healthcare services while minimizing the risk of viral transmission. <sup>120</sup> Virtual consultations, remote patient monitoring, and telehealth interventions became essential components of nursing practice, ensuring continuity of care amidst unprecedented challenges. <sup>119</sup>

Despite the growing recognition of telemedicine's potential in nursing practice, several questions remain unanswered. 124 This comprehensive review aims to address these gaps in knowledge and provide a deeper understanding of the current state of telemedicine in nursing. By exploring the roles, impacts, and challenges of telemedicine, we aim to identify opportunities to optimize its implementation, promote evidence-based practices, and overcome potential barriers hindering its widespread adoption. The primary aim of this review is to critically analyze the evolving landscape of telemedicine in nursing practice, providing valuable insights for healthcare stakeholders, policymakers, and nursing professionals. By consolidating evidence from current research, expert opinions, and best practices, we endeavor to present a comprehensive overview of telemedicine's impact on nursing care and patient outcomes.

#### 2. Method

#### 2.1. Literature search strategy

A comprehensive literature review was conducted to collect relevant articles and documents related to telemedicine in nursing practice. The search covered publications across multiple databases, including PubMed, CINAHL, Google Scholar, and ScienceDirect, spanning the

period from 2010 to 2023. This yielded a total of 198 articles, with PubMed contributing 71 articles, CINAHL contributing 27 articles, Google Scholar contributing 38 articles, and ScienceDirect contributing 62 articles (see Fig. 1 for the PRISMA flowchart). To ensure the integrity of our review process, duplicates were meticulously sorted and removed using reference management software. Following this initial identification phase, we screened the articles based on their titles and abstracts, resulting in 96 articles deemed potentially relevant for full-text review. Subsequently, a thorough assessment of the full-text articles was conducted, applying predetermined inclusion and exclusion criteria. Through this meticulous screening process, 35 articles were identified as meeting the eligibility criteria for inclusion in our review. This multidatabase approach ensured a comprehensive coverage of the available literature and enabled selection of a diverse range of articles for our review.

Table 1 below provides a clear overview of the number of articles identified, selected for full-text review, and ultimately eligible for review across different databases.

The following keywords and Boolean operators were used for the search:

"Telemedicine" OR "Telehealth", "Nursing practice" OR "Nursing care", "Patient care" OR "Healthcare delivery".

"Ethical considerations" OR "Ethical challenges".

"Teletriage" OR "Remote patient monitoring".

"Teleconsultations" OR "Virtual visits".

"Telepsychiatry" OR "Mental health support".

"Teleeducation" OR "Professional development".

"Telehealth in rural areas" OR "Underserved populations".

#### 2.2. Inclusion and exclusion criteria

Articles and documents were included if they met the following criteria: being published in peer-reviewed journals, written in English, focused on the role, impacts, and challenges of telemedicine in nursing practice, including relevant data on telemedicine technologies, ethical considerations, patient outcomes, or future directions, and being published between 2010 and 2023. Conversely, articles were excluded if they were published in non-peer-reviewed sources, not written in English, lacked focus on telemedicine in nursing practice, did not include relevant data on telemedicine technologies, ethical considerations, patient outcomes, or future directions, or were published outside the specified timeframe of 2010 to 2023.

#### 2.3. Study selection process

Two independent reviewers conducted the initial screening of titles and abstracts to identify potentially relevant articles. Full-text articles were then assessed for eligibility based on the inclusion and exclusion criteria. Any disagreements between reviewers were resolved through discussion, and a third reviewer was consulted if necessary.

#### 2.4. Data extraction and synthesis

Data were extracted from the selected articles using a standardized data extraction form. Information extracted included study objectives, methodology, key findings, and relevant statistics. Thematic analysis was employed to identify common themes related to the role, impact, and challenges of telemedicine in nursing practice.

Data synthesis involved categorizing and organizing findings according to the predefined themes, including the role of telemedicine in nursing practice, ethical considerations, impacts on patient care, challenges, and future directions. Key insights and trends were summarized, and data were presented in a structured and coherent manner.

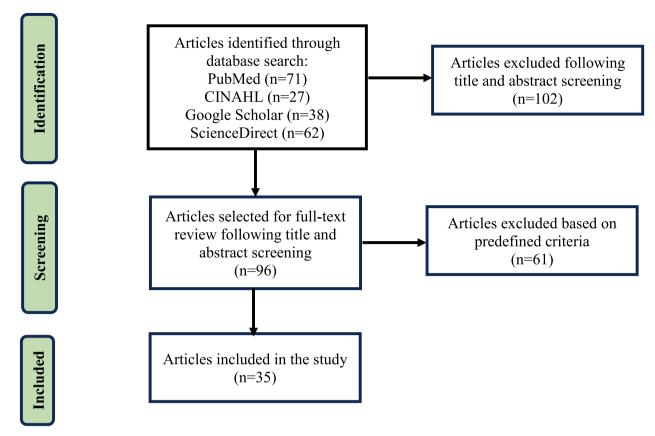


Fig. 1. PRISMA flowchart for selection of included studies.

**Table 1**Summary of Articles Identified, Selected for Full-Text Review, and Eligible for Review across Databases.

Database	Total Articles Identified	Articles Selected for Full-Text Review	Articles Eligible for Review
PubMed	71	37	11
CINAHL	27	14	6
Google Scholar	38	19	8
ScienceDirect	62	26	10
Total	198	96	35

#### 2.5. Ethical considerations

This study is a narrative review and did not involve human subjects or the collection of personal data; thus, ethical approval was not required.

#### 3. The role of telemedicine in nursing practice

The integration of telemedicine in nursing practice has brought about transformative changes, enhancing patient care, improving health outcomes, and overcoming geographical barriers in healthcare delivery.  $^{55,127}$  Teletriage, remote patient monitoring, teleconsultations, telepsychiatry, teleeducation, and telehealth for rural and underserved populations have revolutionized the roles of nurses, fostering patient-centered care and interdisciplinary collaboration.  $^{24,31}$  As telemedicine continues to evolve, nurses are poised to play a critical role in leveraging these technologies to advance healthcare and create a more accessible and efficient healthcare system for all.  $^{129}$ 

#### a. Teletriage and remote patient monitoring

Teletriage and remote patient monitoring have emerged as invaluable tools in nursing practice, revolutionizing the way nurses assess, monitor, and prioritize patient care. <sup>129</sup> Teletriage allows nurses to remotely evaluate patients' health concerns, symptoms, and medical history to determine the appropriate level of care needed. <sup>105</sup> This is particularly crucial in emergency situations and can significantly reduce unnecessary visits to emergency departments, easing the burden on healthcare facilities. <sup>32</sup>

Remote patient monitoring (RPM) involves the use of wearable devices and home-based monitoring systems to collect and transmit patients' vital signs, health data, and symptoms to healthcare providers in real-time. RPM empowers nurses to closely monitor patients with chronic conditions, post-operative recovery, or other complex health needs without requiring them to visit the healthcare facility frequently. Early detection of potential health issues through RPM enables timely interventions, such as targeting high-risk individuals, accurate detection of health decline, responsive and timely care, personalized and supportive care, and collaborative and integrated care leading to better disease management and improved patient outcomes. 139,142

#### b. Teleconsultations and virtual visits

Teleconsultations and virtual visits have revolutionized the nurse-patient relationship, enabling nurses to provide timely and personalized care regardless of geographical distances.  $^{80,150}$  This enhances patient engagement and satisfaction, as patients can access health-care services from the comfort of their homes  $^{1,98}$ . Furthermore, teleconsultations foster interdisciplinary collaboration, enabling nurses to consult with physicians, specialists, and other healthcare professionals remotely.  $^{18,106}$  This multidisciplinary approach enhances care coordination, leading to more comprehensive and patient-centered treatment strategies.  $^{140}$ 

#### c. Telepsychiatry and Mental Health Support

Telepsychiatry has emerged as a critical component of nursing practice, facilitating the delivery of mental health services to individuals in remote or underserved areas. 110,145 The shortage of mental health providers in certain regions can create significant barriers to accessing care. Telepsychiatry addresses this challenge by allowing nurses and nurse practitioners (NPs) to connect with mental health patients through virtual platforms, such as real-time video conferencing and audio messaging.<sup>82</sup> Nurses in telepsychiatry play a vital role in providing mental health care. While registered nurses usually do not have prescribing authority for psychiatric medication, they can conduct mental health assessments, provide counseling, and offer support to patients with various mental health conditions, such as depression, anxiety, and post-traumatic stress disorder (PTSD). 151 In contrast, NPs, who have prescriptive authority, can diagnose, treat, and prescribe medications for mental health conditions, thus playing a significant role in telepsychiatry. Additionally, telepsychiatry has proven effective in crisis interventions and suicide prevention, as it allows for immediate assistance and remote monitoring of at-risk individuals.<sup>30</sup>

#### d. Teleeducation and professional development for nurses

Teleeducation and professional development opportunities have transformed the way nurses access training, continuing education, and skill enhancement. 100 Online platforms and virtual classrooms have made educational resources readily available, allowing nurses to pursue advanced certifications and specialized training from reputable institutions worldwide. 53 Teleeducation not only supports nurses' academic growth but also helps in staying abreast of the latest medical advancements, evidence-based practices, and technological innovations. This continuous professional development ensures that nurses remain competent and well-equipped to provide high-quality care to their patients. 128

#### e. Telehealth for Rural and Underserved Populations

Telehealth has emerged as a lifeline for individuals residing in rural and underserved areas with limited access to healthcare facilities. Telemedicine initiatives extend medical services, including primary care, specialty consultations, and preventive health measures, to remote communities. The Nurses play a pivotal role in telehealth programs targeted at rural and underserved populations, providing health assessments, patient education, and health promotion activities through virtual platforms. These telemedicine interventions help bridge healthcare gaps, reduce health disparities, and improve health outcomes in vulnerable populations. Table 2 provides a detailed overview of how telemedicine is utilized across various nursing specialties. It includes information on the nursing specialty, common telemedicine applications, potential benefits, and any notable challenges.

#### 4. Impacts on patient care and outcomes

Telemedicine has emerged as a game-changing force in healthcare, with profound impacts on patient care and outcomes<sup>37,40</sup>. Improved access to healthcare services, enhanced chronic disease management, reduced hospital readmissions, patient engagement, and interdisciplinary collaboration are among the key trends shaping the telemedicine landscape. 101 As technology continues to evolve and healthcare systems adapt to meet the challenges of the future, nurses will play a central role in leveraging telemedicine to optimize patient care, drive positive health outcomes, and create a patient-centric healthcare experience for all healthcare delivery, patient outcomes, and the overall patient experience.<sup>36</sup> With the advent of advanced telecommunication technologies and the widespread adoption of telemedicine, healthcare is easier to access.<sup>20</sup> This has revolutionized medical service delivery by allowing patients to consult with professionals from home, reducing travel and wait time, improving patient participation, continuity of care, and prompt interventions through remote monitoring and virtual

**Table 2**Telemedicine Utilization Across Nursing Specialties.

Nursing Specialty	Telemedicine Applications	Potential Benefits	Notable Challenges
Teledermatology	- Skin condition assessments	- Timely diagnosis <sup>49</sup> - Involvement of healthcare and care partner teams <sup>107</sup>	- Limited physical examination capability <sup>103</sup>
Telecardiology	- ECG monitoring - Remote cardiac consultations	- Early detection <sup>99</sup> - Reduced hospitalizations <sup>75</sup> - Involvement of teams <sup>159</sup>	<ul> <li>Limited physical assessments<sup>75</sup></li> <li>Need for specialized equipment<sup>159</sup></li> </ul>
Telepsychiatry	- Mental health counseling - Psychiatric assessments	- Improved access <sup>155</sup> - Reduced travel <sup>62</sup>	- Privacy and stigma concerns <sup>10</sup> - Limited non-verbal cues <sup>38</sup>
Teleoncology	- Cancer care consultations - Chemotherapy follow-ups	- Access to specialized care <sup>133</sup> - Reduced travel <sup>117</sup>	- Complex treatment discussions <sup>78</sup> - Emotional support <sup>131</sup>
Telesurgery Nursing	- Surgical consultations - Preoperative assessments	- Expert opinions <sup>134</sup> - Reduced surgical risks <sup>67</sup>	- Limited hands-or assessments <sup>134</sup> - Technical challenges during surgery <sup>121</sup>
Tele-ICU Nursing	- Intensive care monitoring - Vital sign monitoring	- Early intervention <sup>85</sup> - Reduced mortality <sup>85</sup> - Involvement of teams <sup>43</sup>	- Data overload <sup>65</sup>
Teletriage Nursing	- Remote patient assessments - Symptom assessment	<ul> <li>Prioritized care<sup>86</sup></li> <li>Reduced ED overcrowding<sup>54</sup></li> <li>Involvement of teams<sup>158</sup></li> </ul>	- Limited physical assessments <sup>22</sup>
Telepharmacy Nursing	- Medication management - Medication therapy management	- Medication adherence <sup>152</sup> - Enhanced safety <sup>35</sup> - Involvement of teams <sup>158</sup>	Limited hands-or medication     administration <sup>152</sup> Lack of in-persor medication review <sup>138</sup>
Tele-Home Health Nursing	- Home-based patient care - Chronic disease management	<ul> <li>Patient comfort<sup>93</sup></li> <li>Reduced hospitalizations<sup>115</sup></li> </ul>	- Limited physical assessments <sup>115</sup> - Technical challenges during visits <sup>123</sup>

consultations. The integration of telemedicine into patient care has resulted in significant impacts on platforms, nurses and healthcare providers have been able to deliver care more efficiently and effectively.  $^{20,79}$ 

#### 4.1. Improved access to healthcare services

One of the most prominent benefits of telemedicine is improved access to healthcare services, particularly for patients residing in remote or underserved areas. <sup>63</sup> Telemedicine allows patients to connect with healthcare providers without the need for physical travel, eliminating geographical barriers. <sup>3</sup> This improved accessibility translates to timely interventions, early diagnosis, and better management of chronic conditions, ultimately leading to enhanced patient outcomes. In telestroke programs, neurologists use specialized telemedicine platforms such as REACH Health and InTouch Health to remotely assess and diagnose stroke patients in emergency departments. <sup>94</sup> These platforms enable real-time video consultations, allowing neurologists to evaluate symptoms, review medical imaging, and recommend time-critical treatments like thrombolytic therapy. This approach significantly reduces the time to treatment, improving outcomes for stroke patients and minimizing disability. <sup>64,111</sup>

#### 4.2. Enhanced chronic disease management

Telemedicine has revolutionized the management of chronic diseases, such as diabetes, hypertension, and heart failure. <sup>16</sup> Through remote patient monitoring and teleconsultations, nurses can closely monitor patients' health metrics, medication adherence, and symptoms. <sup>146</sup> This continuous monitoring empowers nurses to detect changes in patients' conditions promptly, intervene as needed, and provide personalized care plans, leading to better disease management and reduced hospital readmissions. <sup>144</sup> For example, patients with cardiac conditions use mobile apps and connected devices (e.g., AliveCor's KardiaMobile, Eko) to record and transmit their ECG readings to healthcare providers. Nurses and cardiologists can remotely monitor these readings for irregularities or arrhythmias. <sup>23,88</sup> Early detection of cardiac issues allows for timely interventions, potentially preventing heart-related complications and hospitalizations. <sup>88</sup>

#### 4.3. Reduced hospital readmissions

Telemedicine has shown promise in reducing hospital readmissions, a critical factor in healthcare costs and patient well-being. <sup>13</sup> By monitoring patients remotely, nurses can detect early signs of complications, ensuring timely interventions and preventing hospitalizations. <sup>148</sup> Teleconsultations also facilitate post-discharge follow-ups, enabling nurses to address patients' concerns and ensure a smooth transition from hospital to home care. <sup>71</sup> For instance, patients undergoing cancer treatment can consult with oncology nurses and oncologists through teleoncology platforms such as American Well's Onco360, Navigating Cancer. These consultations can cover treatment plans, side-effect management, and psychosocial support. Teleoncology services enhance patient access to specialized care, reduce the need for travel to cancer centers, and ensure that patients receive timely guidance, potentially improving treatment adherence and quality of life. <sup>45</sup>

#### 4.4. Patient engagement and empowerment

Telemedicine platforms promote patient engagement and empowerment by providing patients with access to their health data, educational resources, and interactive tools.<sup>27</sup> Patients actively involved in their care tend to have better health outcomes as they become more aware of their conditions, adhere to treatment plans, and make informed decisions regarding their health.<sup>89</sup> Teledermatology such as DermEngine, and VisualDx allows nurses and dermatologists to assess skin conditions remotely. Patients can capture images of their skin issues using a smartphone app and share them securely with healthcare providers. Nurses can triage cases, and dermatologists can provide diagnoses and treatment recommendations. <sup>118</sup> Teledermatology improves access to dermatological care, reduces wait times, and ensures that skin conditions are addressed promptly. 96,160 However, it is important to acknowledge the limitations and potential for errors that may arise from the quality of images, such as poor lighting, blurry images, or poor picture angles that can impede the dermatologist's ability to establish a precise diagnosis.

#### 4.5. Enhanced care coordination and interdisciplinary collaboration

Telemedicine promotes seamless care coordination and interdisciplinary collaboration among healthcare teams. <sup>41</sup> Nurses can easily communicate with physicians, specialists, and other healthcare professionals through virtual platforms, leading to more comprehensive and coordinated care plans. <sup>74,137</sup> This collaborative approach ensures that patients receive holistic and patient-centered care, resulting in improved health outcomes. Patients with diabetes can use CGM devices (e.g., Dexcom, Freestyle Libre) that continuously monitor their glucose levels. <sup>58</sup> These devices transmit data to mobile apps, which nurses and endocrinologists can remotely access. <sup>46,59</sup> Nurses can review glucose

trends, adjust insulin regimens, and provide education to patients about managing their diabetes effectively.  $^{108}$  Remote diabetes management using CGM improves glycemic control and reduces the risk of complications.  $^{57}$ 

#### 4.6. Timely emergency and critical care interventions

In emergency and critical care settings, telemedicine plays a crucial role in delivering timely interventions. Teletriage allows nurses to assess patients remotely and direct them to appropriate levels of care, enabling rapid response and optimal utilization of healthcare resources. The intime-sensitive situations, teleconsultations enable nurses to consult with specialists quickly, facilitating expert advice and informed decision-making. For instance, in tele-ICU programs, critical care nurses and intensivists use telemedicine technology (e.g., eICU by Philips, Mercy Virtual) to monitor patients in ICUs from remote locations. High-definition cameras and real-time data streams allow healthcare providers to continuously assess patients, detect early signs of deterioration, and intervene promptly. Tele-ICU programs have been associated with reduced mortality rates and shorter ICU stays. St

#### 4.7. Positive patient experience and satisfaction

The convenience and flexibility offered by telemedicine contribute to a positive patient experience and increased patient satisfaction. 112 Patients appreciate the ability to access healthcare services from the comfort of their homes, reducing wait times, and avoiding unnecessary travel. 63 Additionally, the personalized care provided through telemedicine fosters a sense of connection and trust between patients and healthcare providers. 126 Mental health nurses and counselors use telebehavioral health platforms such as Zoom, and Doxy.me to provide therapy and counseling sessions to patients. 25 These sessions address various mental health concerns, including anxiety, depression, and substance abuse. Telebehavioral health improves access to mental health services, reduces stigma, and can lead to improved mental health outcomes. 9

Table 3 delves into the impact of telemedicine on patient outcomes in various healthcare areas. It includes details on the healthcare area, specific telemedicine interventions, observed outcomes, and supporting studies or evidence.

#### 5. Enhancing nursing practice and workflows

Telemedicine's integration into nursing practice has had a profound impact on workflows and the way nurses deliver patient care. <sup>63</sup> Efficient communication, remote patient monitoring, teletriage services, and continuing professional development are among the current trends that enhance nursing practice and empower nurses to provide high-quality, patient-centered care. <sup>86</sup> As technology continues to advance, nurses will continue to play a central role in leveraging telemedicine to optimize workflows, improve patient outcomes, and shape the future of healthcare delivery. <sup>50</sup>

#### 5.1. Efficient communication and care coordination

Telemedicine platforms enable nurses to communicate with patients, physicians, and other members of the healthcare team in real-time. <sup>63</sup> Virtual communication channels, such as secure video conferencing and messaging applications, facilitate quick consultations, care updates, and patient handoffs. This seamless communication improves care coordination, allowing nurses to stay informed about patients' conditions, treatment plans, and progress. <sup>63</sup> For instance, during the COVID-19 pandemic, nurses used secure video conferencing platforms (e.g., Zoom for Healthcare, Microsoft Teams, Doxy.me) to conduct virtual care team meetings, discuss patient care plans, and consult with physicians and specialists. These platforms allowed for real-time communication

**Table 3**Telemedicine Impact on Patient Outcomes.

Healthcare Area	Telemedicine Interventions	Observed Outcomes	Supporting Evidence
Stroke Care Chronic Disease Care	Telestroke consultations, remote imaging Remote monitoring, teleconsultations	Reduced time to thrombolysis, improved survival Better disease management, fewer hospitalizations	AHA/ASA guidelines, clinical trials <sup>48</sup> Systematic reviews, randomized controlled trials <sup>154</sup>
Mental Health	Telepsychiatry, counseling sessions	Improved access to care, reduced psychiatric symptoms	Clinical studies, patient surveys <sup>51</sup>
Diabetes	Continuous glucose monitoring	Improved glycemic control, fewer complications	Clinical trials, diabetes management programs <sup>28</sup>
Management Dermatology	Teledermatology consultations	Timely diagnosis, early treatment	Dermatology journals, clinical case studies <sup>97</sup>

and care coordination while minimizing in-person contact. 102

#### 5.2. Remote patient monitoring and early intervention

Remote patient monitoring (RPM) has emerged as a critical aspect of enhancing nursing practice. RPM tools, such as wearable devices and home-based monitoring systems, allow nurses to track patients' vital signs, symptoms, and health data remotely. 149 By continuously monitoring patients, nurses can detect changes in health status early on, enabling timely interventions and proactive care. 17 RPM is particularly beneficial for managing chronic conditions, post-operative recovery, and high-risk patients, leading to improved patient outcomes and reduced hospitalizations. 52 Nurses employed wearable devices (e.g., Fitbit, Apple Watch) and remote monitoring software (e.g., Philips Healthcare) to track patients with chronic conditions like heart disease. These devices continuously collected data on patients' heart rate, activity levels, and ECG readings, which nurses monitored remotely. If any concerning trends were detected, nurses could intervene promptly, preventing complications and hospital admissions. 90

#### 5.3. Telehealth triage and decision support

Teletriage services have transformed the way nurses assess patients and prioritize care. Through teletriage, nurses can conduct remote health assessments, evaluate patients' symptoms, and make informed decisions regarding the appropriate level of care needed. <sup>87</sup> This not only optimizes healthcare resources by directing patients to the most suitable care setting but also expedites access to care for patients requiring urgent attention. <sup>19</sup> In emergency departments, nurses utilized teletriage software such as Bright.md, and Teladoc to conduct remote assessments of patients with non-life-threatening conditions. Patients could use a mobile app to provide information about their symptoms, and nurses would evaluate the data to determine the appropriate course of action. This helped prioritize care and reduce overcrowding in emergency departments. <sup>157</sup>

#### 5.4. Empowering nurses to practice at their fullest potential

Telemedicine empowers nurses to practice at the top of their licensure and expertise. With access to teleconsultations and virtual visits, nurses can independently assess and manage patients within their scope of practice, enhancing their autonomy and decision-making capabilities. <sup>147</sup> This increased responsibility and involvement in patient care contribute to job satisfaction and professional growth among nurses. <sup>153</sup> Nurse practitioners (NPs) working on telemedicine platforms such as Amwell, and Doctor On Demand provided primary care services to patients. NPs conducted virtual visits, assessed patient conditions, ordered tests, prescribed medications, and offered health education. <sup>122</sup> These platforms empowered NPs to practice autonomously within their scope of practice.

#### 5.5. Teleeducation and continuing professional development

Telemedicine offers nurses ample opportunities for teleeducation and continuous professional development.  $^{81}$  Virtual conferences,

webinars, and online courses allow nurses to expand their knowledge, acquire new skills, and stay up-to-date with the latest medical advancements and evidence-based practices. Teleeducation fosters a culture of lifelong learning, enabling nurses to deliver high-quality and evidence-based care to their patients. Nursing schools and healthcare organizations used virtual learning management systems (e.g., Moodle, Canvas) and webinar platforms (e.g., GoToWebinar, Zoom) to deliver continuing education courses to nurses. Topics included the latest treatment protocols, emerging healthcare technologies, and updates on best practices. Nurses could participate in these sessions from anywhere, promoting ongoing professional development.

#### 5.6. Workflow optimization and time efficiency

Integrating telemedicine into nursing practice has led to workflow optimization and improved time efficiency. <sup>15</sup> Telemedicine reduces the need for physical travel between healthcare facilities, enabling nurses to spend more time on direct patient care and less time on administrative tasks. <sup>56</sup> Virtual consultations and remote monitoring also facilitate timely patient interactions, reducing waiting times and enhancing the overall patient experience. For instance, nurses in hospital settings used EHR systems integrated with telemedicine capabilities such as Epic, and Cerner to conduct virtual rounds. They could review patient records, consult with specialists, and communicate with patients and their families through the EHR interface. This streamlined workflows and reduced the need for physical travel within the hospital. <sup>81</sup>

#### 5.7. Supporting interprofessional collaboration

Telemedicine promotes interprofessional collaboration among healthcare teams. Nurses can easily consult with physicians, specialists, pharmacists, and other healthcare professionals through virtual platforms, fostering a multidisciplinary approach to patient care. <sup>159</sup> This collaborative environment enhances care coordination, promotes information sharing, and leads to comprehensive and patient-centered treatment strategies. <sup>141</sup> Nurses collaborated with physicians, pharmacists, and other healthcare professionals using specialized collaboration platforms such as Doximity, UpToDate. <sup>68</sup> These platforms allowed for secure messaging, sharing of medical literature, and multidisciplinary discussions about patient care plans.

Table 4 provides a more comprehensive overview of current telemedicine technologies and platforms commonly used in nursing practice. It includes information on the platform name, features, advantages, and potential challenges.

#### 6. Challenges in implementing telemedicine in nursing practice

Addressing these challenges requires a multifaceted approach, including investments in technology infrastructure, policy reform, ongoing education and training for nursing staff, and a commitment to ensuring equitable access to care for all patients, regardless of their digital resources or abilities. <sup>44</sup> Successfully navigating these challenges will be critical in harnessing the full potential of telemedicine in nursing practice. Many healthcare facilities, especially in rural or underserved areas, lack the necessary technological infrastructure and high-speed

**Table 4**Current Telemedicine Technologies and Platforms.

Platform Name	Features	Advantages	Challenges	FDA-Approval Status
Zoom for Healthcare	Secure video conferencing, screen sharing, EHR integration	User-friendly, HIPAA compliant	Potential for technical glitches, cost of enterprise-level subscriptions	Not FDA-approved as a medical device
Doxy.me	Video conferencing, patient waiting rooms, e-prescribing	Simplicity, no software downloads	Limited features for advanced clinical needs	Not FDA-approved as a medical device
Philips Telehealth	Remote patient monitoring, data analytics, alerts	Customizable, supports chronic care	Initial setup and training can be resource- intensive	Not FDA-approved as a medical device
AliveCor's KardiaMobile	Mobile ECG monitoring, instant analysis	Ease of use, early detection of arrhythmias	Limited to cardiac monitoring, need for device purchase	FDA-cleared for cardiac monitoring
Amwell	Teleconsultations, EHR integration, virtual waiting rooms	Large provider network, user- friendly	May require integration with existing EHR systems	Not FDA-approved as a medical device
REACH Health	Telestroke assessments, EHR integration, data sharing	Reduces time to stroke treatment	Requires specialized training for stroke assessments	Not FDA-approved as a medical device
DermEngine	Teledermatology image analysis, AI support	Enhanced diagnostic accuracy	Limited to dermatology, reliance on image quality	Not FDA-approved as a medical device

internet connectivity for robust telemedicine adoption. <sup>60</sup> Insufficient bandwidth and outdated equipment can hinder the effectiveness of telemedicine consultations. <sup>84</sup> In remote regions, nurses may struggle with unreliable internet connections, making it challenging to conduct real-time video consultations with patients. This can lead to disruptions in care and hinder accurate assessments. <sup>56</sup>

The legal and regulatory landscape for telemedicine can be complex and varies from one jurisdiction to another. 113 Compliance with state and federal regulations, licensure requirements, and reimbursement policies can be daunting for nurses and healthcare organizations. 143 Telemedicine often involves providing care across state lines. Nurses must navigate the intricacies of licensure compacts and state-specific regulations to ensure they are practicing within legal boundaries when caring for out-of-state patients. Maintaining the privacy and security of patient health information in a telemedicine environment is paramount. 114 The risk of data breaches, unauthorized access, and cyberattacks can be heightened in the digital realm. 92 In 2020, there were instances of telemedicine platforms experiencing security breaches, raising concerns about the confidentiality of patient data. 76 Such incidents highlight the importance of robust cybersecurity measures in telemedicine. The reimbursement landscape for telemedicine services is still evolving. While many insurers have expanded coverage for telemedicine, the reimbursement rates may not always align with the costs of providing telemedicine services. 132 Nurses providing telemedicine services might find that reimbursement rates are lower compared to in-person visits. This can be a financial challenge for healthcare organizations, particularly if they invest in advanced telemedicine technologies. Successful telemedicine implementation requires training and education for nursing staff. Nurses need to be proficient in using telemedicine platforms, conducting virtual assessments, and ensuring the technology does not compromise the quality of care. 12

During the rapid adoption of telemedicine in response to the COVID-19 pandemic, many nurses had to quickly learn how to use telehealth tools. Inadequate training can lead to technical difficulties during consultations and decreased confidence in using telemedicine. <sup>47</sup> Healthcare professionals, including nurses, may resist the adoption of telemedicine due to concerns about changes in workflow, potential job displacement, or perceived limitations in the quality of care. <sup>91</sup> Some nurses may resist telemedicine because they value in-person interactions with patients or believe that it cannot fully replace physical assessments. <sup>56</sup> Overcoming this resistance requires effective change management strategies. <sup>83</sup>

Not all patients have equal access to digital devices or the digital literacy required for telemedicine. This can exacerbate health disparities, as those without access to technology may be excluded from telehealth services. Elderly patients, individuals with disabilities, or those in lower-income communities may face barriers to accessing and effectively using telemedicine services. This can result in unequal access to care. The human connection in nursing practice is essential for building trust and rapport with patients. Telemedicine, while

convenient, can sometimes feel impersonal, leading to concerns about the loss of the "human touch" in healthcare. Some patients may express dissatisfaction with telemedicine because they miss the physical presence of a nurse or the reassurance of a bedside manner. Striking a balance between the convenience of telemedicine and the personal touch of in-person care is a challenge. Table 5 provides an in-depth look at common challenges in telemedicine implementation in nursing practice and detailed mitigation strategies for each challenge.

### 7. Addressing ethical considerations in telemedicine in nursing practice

The integration of telemedicine into nursing practice brings with it a set of ethical considerations that nurses and healthcare organizations must carefully navigate. These considerations revolve around issues of patient privacy, informed consent, data security, quality of care, and maintaining human connection in healthcare. Addressing these ethical concerns is essential to ensure that telemedicine upholds the highest standards of patient care and professionalism.

**Table 5**Challenges and Mitigation Strategies in Telemedicine Implementation.

0	O	•
Challenge	Challenges Description	Mitigation Strategies
Technological Infrastructure	Insufficient technology resources and infrastructure	Invest in upgraded technology and broadband access
Legal and Regulatory Concerns	Complex and evolving telehealth regulations	Regularly monitor and comply with state and federal laws
Privacy and Security Risks	Risks of data breaches and patient privacy violations	Implement robust cybersecurity measures and encryption
Reimbursement and Financial Barriers	Inadequate reimbursement rates for telehealth services	Advocate for fair reimbursement policies
Training and Education	Lack of telehealth training for nursing staff	Provide comprehensive training and ongoing support
Resistance to Change	Staff reluctance and concerns about telemedicine	Engage staff in decision- making, provide education
Digital Health Disparities	Inequitable access to telemedicine due to technology gaps	Offer alternative access options for underserved patients
Maintaining the Human Touch	Challenges in building rapport and patient-provider trust	Provide training in telehealth communication skills
Scope of Practice and Boundaries	Unclear boundaries and potential scope violations	Clearly define roles and responsibilities, consult specialists
Cultural Competency and Diversity	Insufficient cultural competency in telehealth	Offer cultural competency training, provide language support

Protecting patient privacy and confidentiality in the digital realm is paramount. Nurses must ensure that patient health information is securely transmitted and stored during telemedicine interactions.<sup>2</sup> A nurse conducting a virtual consultation with a patient must ensure that the video conferencing platform used is encrypted and compliant with health data privacy regulations like HIPAA. Patient discussions should occur in private settings to prevent unauthorized access.<sup>70</sup> Nurses are responsible for obtaining informed consent from patients before initiating telemedicine consultations. Patients should be fully informed about the nature of telemedicine, its limitations, and the potential risks and benefits.<sup>119</sup> Prior to a telemedicine session, a nurse should explain to the patient the purpose of the consultation, the technology to be used, and any potential limitations, such as the inability to conduct a physical examination.<sup>113</sup> Patients should have the opportunity to ask questions and provide informed consent to participate.<sup>79</sup>

Safeguarding patient data from data breaches and cyberattacks is an ethical imperative. Nurses should be vigilant in ensuring that telemedicine platforms and devices are secure. A nurse should use secure and encrypted communication tools for telemedicine consultations. Regularly updating passwords, keeping software up-to-date, and following best practices in cybersecurity are essential to protect patient information. Nurses have a duty to provide high-quality care to patients, regardless of the mode of delivery. Maintaining the same standards of care in telemedicine as in traditional in-person care is an ethical obligation. When conducting telemedicine consultations, nurses should ensure that assessments and interventions are thorough and evidence-based. They should adhere to clinical guidelines and best practices, striving for the same level of care excellence as in physical healthcare encounters. When the conductors is an excellence as in physical healthcare encounters.

Improper use of digital devices in telenursing can lead to errors in data collection, transmission, and analysis, which can affect patient safety and quality of care. Problems such as inaccurate readings, data glitches, communication breakdowns, and workflow interruptions can occur, impacting patient outcomes and efficiency of care. Ensuring that telemedicine does not exacerbate healthcare disparities is an ethical obligation. Nurses must work to provide equitable access to care for all patients, regardless of their technological resources or abilities. To address disparities, nurses and healthcare organizations may need to explore alternative communication methods (e.g., telephone consultations) for patients who lack internet access or digital devices. 12 Ensuring that telemedicine is accessible to all socioeconomic groups is essential. Maintaining the human touch in healthcare is an ethical consideration. Nurses should strive to preserve the therapeutic nurse-patient relationship, which can be challenged in virtual care settings. 10 To maintain the human connection, nurses can actively engage with patients during telemedicine consultations. This includes demonstrating empathy,

active listening, and maintaining eye contact via video conferencing to create a sense of presence and connection.  $^{42}$ 

Nurses must operate within the scope of their practice and maintain professional boundaries during telemedicine encounters. A nurse should not provide medical advice or treatment outside their area of expertise, even in a telemedicine context. If a patient's condition requires the expertise of a specialist, the nurse should facilitate a referral to ensure the patient receives appropriate care. Ensuring the continuity of care when transitioning between in-person and telemedicine encounters is an ethical consideration.<sup>2</sup> Patients should experience a seamless transition in their care journey. If a patient begins a treatment plan through telemedicine and later requires in-person care or hospitalization, the nurse should ensure that relevant information from telemedicine encounters is appropriately integrated into the patient's medical record and communicated to other healthcare providers for continuity of care.<sup>33</sup>

Table 6 provides a comprehensive overview of key ethical considerations related to telemedicine in nursing practice. It includes ethical concerns, examples, recommended actions, and potential consequences.

#### 8. Conclusion

The integration of telemedicine into nursing practice has already had a profound impact on healthcare delivery, but its potential is far from fully realized. As technology continues to advance and healthcare systems evolve, several future directions and recommendations can help shape the trajectory of telemedicine in nursing practice: Continued advancements in telemedicine technology are expected, including improvements in telehealth platforms, wearable devices, and remote monitoring tools. These developments will enhance the capabilities of nurses in assessing and caring for patients remotely. Risk management is an essential part of telenursing process. Healthcare organizations have an obligation to implement protocols to identify, evaluate, and minimize risks related to the utilization of digital devices, ensuring patient safety, data security, and adherence to regulatory standards. This includes training nurses, developing safety guidelines, and supervising technological functionality to minimize the occurrence of potential risks. It is, therefore, recommended that nurses stay abreast of technological innovations and be prepared to adapt to new tools and platforms as they emerge. Healthcare organizations should invest in state-of-the-art telemedicine infrastructure to support nursing practice.

#### CRediT authorship contribution statement

**Motunrayo Famujimi:** Writing – review & editing, Writing – original draft. **Temitope Olawumi:** Writing – review & editing, Writing – original draft. **Deborah Esan:** Writing – review & editing, Supervision.

**Table 6**Ethical Considerations in Telemedicine.

Ethical Concern	Examples	Recommended Actions	Potential Consequences
Patient Privacy and Confidentiality	Unauthorized access to patient data	Use encrypted platforms, educate patients on data security	Breach of patient confidentiality
Informed Consent	Lack of patient understanding of telemedicine	Provide clear explanations, document informed consent	Inadequate patient participation
Data Security and Cybersecurity	Data breaches, cyberattacks	Regularly update security measures, monitor for threats	Compromised patient data
Quality of Care	Varied quality in telemedicine encounters	Adhere to clinical guidelines, maintain standards	Suboptimal patient outcomes
Equitable Access to Care	Disparities in telehealth access	Offer alternative communication for underserved patients	Exacerbation of healthcare disparities
Sustaining the Patient-Caregiver Bond	Impersonal telemedicine interactions	Focus on patient engagement, empathy, and rapport	Decreased patient satisfaction
Professional Practice Limits and Ethical Boundaries	Providing care outside of scope	Provide clear explanations, document informed consent	Legal and ethical violations
Continuity of Care	Transitioning between telemedicine and in-person	Ensure seamless information transfer, care coordination	Fragmented patient care
Cultural Sensitivity and Inclusivity	Inadequate cultural sensitivity in telemedicine	Provide cultural competency training, language support	Cultural misunderstandings

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#### **Declaration of Competing Interest**

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

#### References

- Aashima, Nanda M, Sharma R. A review of patient satisfaction and experience with telemedicine: a virtual solution during and beyond COVID-19 pandemic. *Telemed* e-Health. 2021;27(12):1325–1331.
- Abdul-Rahim S, Alshahrani S. Ethical considerations in telemedicine and remote healthcare. Saudi J Nurs Health Care. 2023;6(7):241–246.
- Achenbach SJ. Telemedicine: benefits, challenges, and its great potential. Health L Pol'Y Brief. 2020;14:1.
- Alanazi AT, Alanazi A. Clinicians' perspectives on healthcare cybersecurity and cyber threats. Cureus. 2023;15(10).
- Álbahri OS, Albahri AS, Mohammed KI, et al. Systematic review of real-time remote health monitoring system in triage and priority-based sensor technology: taxonomy, open challenges, motivation and recommendations. J Med Syst. 2018; 42:1–27.
- Albahri AS, Alwan JK, Taha ZK, et al. IoT-based telemedicine for disease prevention and health promotion: State-of-the-Art. J Netw Comput Appl. 2021;173, 102873.
- Andrade LH, Alonso J, Mneimneh Z, et al. Barriers to mental health treatment: results from the WHO World Mental Health surveys. *Psychol Med.* 2014;44(6): 1303–1317.
- Antoniotti NM. Standards and guidelines in teleheatlh: creating a compliance and evidence-based telehealth practice. Telemed, Telehealth Telepresence: Princ, Strateg, Appl, N Dir. 2021:97–113.
- Arafat MY, Zaman S, Hawlader MDH. Telemedicine improves mental health in COVID-19 pandemic. J Glob Health. 2021 Mar 7;11, 03004. https://doi.org/ 10.7189/jogh.11.03004. PMID: 34326984; PMCID: PMC8294826.
- Arries-Kleyenstuber, E. (2021). Emerging Digital Technologies in Virtual Care in Clinical Nursing Practice: An Integrative Review of Ethical Considerations and Strategies.
- Arshad Ali S., Bin Arif T., Maab H., et al. Global interest in telehealth during COVID-19 pandemic: an analysis of Google Trends™ Cureus. 2020;12:e10487. doi: 10.7759/cureus.10487.
- 12. Atherton H, Brant H, Ziebland S, et al. The potential of alternatives to face-to-face consultation in general practice, and the impact on different patient groups: a mixed-methods case study. Health Serv Deliv Res. 2018;6(20).
- 13. Barbosa W, Zhou K, Waddell E, Myers T, Dorsey ER. Improving access to care: telemedicine across medical domains. *Annu Rev Public Health*. 2021;42:463–481.
- Barney A, Buckelew S, Mesheriakova V, Raymond-Flesch M. The COVID-19 pandemic and rapid implementation of adolescent and young adult telemedicine: challenges and opportunities for innovation. *J Adolesc Health*. 2020;67(2): 164-171
- Bashir A, Bastola DR. Perspectives of nurses toward telehealth efficacy and quality of health care: pilot study. *JMIR Med Inf*. 2018 May 25;6(2), e35. https://doi.org/ 10.2196/medinform.9080. PMID: 29802089; PMCID: PMC5993972.
- Bashshur RL, Shannon GW, Smith BR, et al. The empirical foundations of telemedicine interventions for chronic disease management. *Telemed e-Health*. 2014;20(9):769–800.
- Becking-Verhaar FL, Verweij RPH, de Vries M, Vermeulen H, van Goor H, Huisman-de Waal GJ. Continuous Vital Signs Monitoring with a Wireless Device on a General Ward: A Survey to Explore Nurses' Experiences in a Post-Implementation Period. Int J Environ Res Public Health. 2023 May 11;20(10):5794. https://doi.org/ 10.3390/ijerph20105794. PMID: 37239523; PMCID: PMCI0218586.
- Ben-Pazi H, Browne P, Chan P, et al. The promise of telemedicine for movement disorders: an interdisciplinary approach. International Parkinson and Movement Disorder Society Telemedicine Task Force Curr Neurol Neurosci Rep. 2018;18:1–10.
- Bhaskar S, Bradley S, Chattu VK, et al. Telemedicine as the New Outpatient Clinic Gone Digital: Position Paper From the Pandemic Health System REsilience PROGRAM (REPROGRAM) International Consortium (Part 2). Front Public Health. 2020 Sep 7;8:410. https://doi.org/10.3389/fpubh.2020.00410. PMID: 33014958; PMCID: PMC7505101.
- Bhati D, Deogade MS, Kanyal D. Improving patient outcomes through effective hospital administration: a comprehensive review. Cureus. 2023;15(10).
- Bittencourt MS, Generoso G, Melo PHM, et al. Statement–protocol for the reconnection of cardiology services with patients During the COVID-19 Pandemic–2020. Arg Bras De Cardiol. 2020;115:776–799.
- Blome A, Anderson S, Middlebrook-Lovett M, et al. Impact of a Teletriage program on left without being seen rates and cost. *J Hosp Adm.* 2022. https://doi.org/ 10.5430/jha.v11n1p35.

- Bouzid Z, Al-Zaiti SS, Bond R, Sejdić E. Remote and wearable ECG devices with diagnostic abilities in adults: a state-of-the-science scoping review. Heart Rhythm. 2022;19(7):1192–1201.
- Brody AA, Sadarangani T, Jones TM, et al. Family-and person-centered interdisciplinary telehealth: policy and practice implications following onset of the COVID-19 pandemic. *J Gerontol Nurs*. 2020;46(9):9–13.
- Bunnell BE, Barrera JF, Paige SR, Turner D, Welch BM. Acceptability of telemedicine features to promote its uptake in practice: a survey of community telemental health providers. *Int J Environ Res Public Health*. 2020;17:8525. https://doi.org/10.3390/ijerph17228525.
- Búřilová P, Pokorná A, Búřil J, et al. Identification of telehealth nursing approaches in the light of the COVID-19 pandemic-A literature review. J Nurs Manag. 2022;30(8):3996–4004. https://doi.org/10.1111/jonm.13864.
- Burton L, Rush KL, Smith MA, et al. Empowering patients through virtual care delivery: qualitative study with micropractice clinic patients and health care providers. *JMIR Form Res.* 2022 Apr 27;6(4), e32528. https://doi.org/10.2196/ 32528. PMID: 35413002; PMCID.
- Calikoglu F, Bagdemir E, Celik S, Idiz C, Ozsarı H, Issever H, et al. Telemedicine as a motivational tool to optimize metabolic control in patients with diabetes in Turkey: a prospective, randomized, controlled TeleDiab Trial. *Telemed J e-Health: J Am Telemed Assoc.* 2022. https://doi.org/10.1089/tmj.2022.0028.
- Chaet D, Clearfield R, Sabin JE, Skimming K, Council on Ethical and Judicial Affairs American Medical Association. Ethical practice in telehealth and telemedicine. J Gen Intern Med. 2017;32:1136–1140.
- Chakrabarti S. Usefulness of telepsychiatry: a critical evaluation of videoconferencing-based approaches. World J Psychiatry. 2015;5(3):286.
- Chike-Harris KE, Durham C, Logan A, Smith G, DuBose-Morris R. Integration of telehealth education into the health care provider curriculum: a review. *Telemed J e-Health*. 2020;0(0). https://doi.org/10.1089/tmj.2019.0261.
- 32. Christian MD. Triage. Crit care Clin. 2019;35(4):575–589.
- Coffey JD, Christopherson LA, Williams RD, et al. Development and implementation of a nurse-based remote patient monitoring program for ambulatory disease management. Front Digit Health. 2022;4, 1052408. https://doi. org/10.3389/fdgth.2022.1052408.
- Corden E, Rogers AK, Woo WA, Simmonds R, Mitchell CD. A targeted response to the COVID-19 pandemic: analysing effectiveness of remote consultations for triage and management of routine dermatology referrals. Clin Exp Dermatol. 2020;45: 1047–1050. https://doi.org/10.1111/ced.14289.
- Correard F, Montaleytang M, Costa M, et al. Impact of medication review via teleexpertise on unplanned hospitalizations at 3 months of nursing homes patients (TEM-EHPAD): study protocol for a randomized controlled trial. *BMC Geriatr*. 2020;20. https://doi.org/10.1186/s12877-020-01546-3.
- Cosgrove DM, Fisher M, Gabow P, et al. Ten strategies to lower costs, improve quality, and engage patients: the view from leading health system CEOs. Health Aff. 2013;32(2):321–327.
- Coulter, D.T. (2021). Operationalizing Lewin's 3-step change model in the outpatient setting: A COVID-19 case study.
- Cowan K, McKean A, Gentry M, Hilty D. Barriers to use of telepsychiatry: clinicians as gatekeepers. Mayo Clin Proc. 2019;94(12):2510–2523. https://doi.org/10.1016/ j.mayocp.2019.04.018.
- De Vera K, Challa P, Liu RH, et al. Virtual primary care implementation during COVID-19 in high-income countries: a scoping review. *Telemed e-Health*. 2022;28 (7):920–931.
- Devi KJ, Alghamdi W, Divya N, Alkhayyat A, Sayyora A, Sathish T. Artificial intelligence in healthcare: diagnosis, treatment, and prediction. *E3S Web Conf.* 2023;Vol. 399:04043 (EDP Sciences).
- Donner CF, Raskin J, ZuWallack R, et al. Incorporating telemedicine into the integrated care of the COPD patient a summary of an interdisciplinary workshop held in Stresa, Italy, 7–8 September 2017. Respir Med. 2018;143:91–102.
- Duffy LV, Evans R, Bennett V, Hady JM, Palaniappan P. Therapeutic relational connection in telehealth: concept analysis. *J Med Internet Res.* 2023;25, e43303. https://doi.org/10.2196/43303.
- Ee S, McKelvey H, Williams T, et al. Telemedicine intensive care unit (Tele-ICU) implementation during COVID-19: a scoping review. *Cureus*. 2022;14. https://doi. org/10.7759/cureus.25133.
- 44. Einolghozati, M. (2018). Barriers And Challenges To Implementing Telehealth Among Physicians And Advanced Practice Nurses In The United States.
- Elder AJ, Alazawi H, Shafaq F, Ayyad A, Hazin R. Teleoncology: novel approaches for improving cancer care in North America. *Cureus*. 2023 Aug 16;15(8), e43562. https://doi.org/10.7759/cureus.43562. PMID: 37719501; PMCID: PMCI0502915.
- ElSayed NA, Aleppo G, Aroda VR, et al. 7. Diabetes technology: standards of care in diabetes—2023. *Diabetes Care*. 2023;46(Supplement\_1):S111–S127.
- Etz RS, Solid CA, Gonzalez MM, Britton E, Stange KC, Reves SR. Telemedicine in primary care: lessons learned about implementing health care innovations During the COVID-19 Pandemic. Ann Fam Med. 2023;21(4):297–304.
- Evans N, Sibson L, Day D, Agarwal S, Shekhar R, Warburton E. Hyperacute stroke thrombolysis via telemedicine: a multicentre study of performance, safety and clinical efficacy. *BMJ Open.* 2022;12. https://doi.org/10.1136/bmjopen-2021-057372
- Finnane A, Dallest K, Janda M, Soyer H. Teledermatology for the diagnosis and management of skin cancer: a systematic review. *JAMA Dermatol.* 2017;153: 319–327. https://doi.org/10.1001/jamadermatol.2016.4361.
- Ford JH, Jolles SA, Heller D, et al. Characteristics of telemedicine workflows in nursing homes during the COVID-19 pandemic. BMC Health Serv Res. 2023;23:301. https://doi.org/10.1186/s12913-023-09249-2.

- Fortney J, Bauer A, Cerimele J, et al. Comparison of Teleintegrated Care and Telereferral Care for Treating Complex Psychiatric Disorders in Primary Care: A Pragmatic Randomized Comparative Effectiveness Trial. *JAMA Psychiatry*. 2021. https://doi.org/10.1001/jamapsychiatry.2021.2318.
- Foster C, Schinasi D, Kan K, Macy M, Wheeler D, Curfman A. Remote monitoring of patient-and family-generated health data in pediatrics. Pediatrics. 2022;149(2).
- Franklin G, Martin C, Ruszaj M, et al. How the COVID-19 pandemic impacted medical education during the last year of medical school: a class survey. Life. 2021; 11(4):294.
- Frid S, Ratti M, Pedretti A, et al. Teletriage pilot study (Strategy for Unscheduled Teleconsultations): results, patient acceptance and satisfaction. Stud Health Technol Inform. 2020;270:776–780. https://doi.org/10.3233/SHTI200266.
- Funderskov KF, Boe Danbjørg D, Jess M, Munk L, Olsen Zwisler AD, Dieperink KB. Telemedicine in specialised palliative care: healthcare professionals and their perspectives on video consultations—a qualitative study. *J Clin Nurs*. 2019 Nov;28 (21–22):3966–3976.
- Gajarawala SN, Pelkowski JN. Telehealth benefits and barriers. J Nurse Pr. 2021
   Feb;17(2):218–221. https://doi.org/10.1016/j.nurpra.2020.09.013. Epub 2020
   Oct 21. PMID: 33106751; PMCID: PMC7577680.
- Gal RL, Cohen NJ, Kruger D, et al. Diabetes telehealth solutions: improving selfmanagement through remote initiation of continuous glucose monitoring. *J Endocr Soc.* 2020;4(9):bvaa076.
- Galindo RJ, Umpierrez GE, Rushakoff RJ, et al. Continuous glucose monitors and automated insulin dosing systems in the hospital consensus guideline. J Diabetes Sci Technol. 2020;14(6):1035–1064.
- Grunberger G, Sherr J, Allende M, et al. American Association of Clinical Endocrinology clinical practice guideline: the use of advanced technology in the management of persons with diabetes mellitus. Endocr Pract. 2021;27(6):505–537.
- 60. Gurupur VP, Miao Z. A brief analysis of challenges in implementing telehealth in a rural setting. mHealth. 2022;8:17. https://doi.org/10.21037/mhealth-21.
- Haimi M. The tragic paradoxical effect of telemedicine on healthcare disparities-a time for redemption: a narrative review. BMC Med Inform Decis Mak. 2023;23(1): 1–10
- Hajesmaeel-Gohari S, Keshvardoost S, Bahaadinbeigy K. Travel prevention using telepsychiatric services: a review. J Kerman Univ Med Sci. 2022. https://doi.org/ 10.34172/jkmu.2022.61.
- Haleem A, Javaid M, Singh RP, Suman R. Telemedicine for healthcare: capabilities, features, barriers, and applications. Sens Int. 2021;2, 100117. https://doi.org/ 10.1016/j.sintl.2021.100117. Epub 2021 Jul 24. PMID: 34806053; PMCID: PMC8590973.
- Harahsheh E, English SW, Hrdlicka CM, Demaerschalk B. Telestroke's role through the COVID-19 pandemic and beyond. Curr Treat Options Neurol. 2022;24(11): 589–603. https://doi.org/10.1007/s11940-022-00737-0. Epub 2022 Aug 19. PMID: 35999901; PMCID: PMC9388966.
- Hassan E. Tele-ICU and patient safety considerations. Crit Care Nurs Q. 2018;41: 47–59. https://doi.org/10.1097/CNQ.00000000000185.
- Haynes N, Ezekwesili A, Nunes K, Gumbs E, Haynes M, Swain J. "Can you see my screen?" Addressing racial and ethnic disparities in telehealth. Curr Cardiovasc Risk Ren. 2021:15:1–9.
- Henderson W, Rozeboom P, Bronsert M, et al. Accuracy of the surgical risk preoperative assessment system universal risk calculator in predicting risk for patients undergoing selected operations in 9 specialty areas. Surgery. 2021. https://doi.org/10.1016/j.surg.2021.02.033.
- https://doi.org/10.1016/j.surg.2021.02.033.

  68. Heroe, M.S. (2017). A Collaborative model for supporting shared healthcare in Kenya (Doctoral dissertation, Strathmore University).
- Hickey M., Newton S. Telephone triage for oncology nurses. 3rd Ed. Pittsburgh, PA: Oncology Nursing Society; 2019.
- Houser SH, Flite CA, Foster SL. Privacy and security risk factors related to telehealth services - a systematic review. Perspect Health Inf Manag. 2023;20(1):1f.
- Huerne, K., & Eisenberg, M. (2023). Advancing Telemedicine in Cardiology: A Comprehensive Review of Evolving Practices and Outcomes in a Post-Pandemic Context.
- Hughes L, Petrella A, Phillips N, Taylor RM. Virtual care and the impact of COVID-19 on nursing: a single centre evaluation. J Adv Nurs. 2022;78(2):498–509.
- Hurst EJ. Evolutions in telemedicine: from smoke signals to mobile health solutions. J Hosp Librariansh. 2016;16(2):174–185.
- Imison C, Castle-Clarke S, Watson R, Edwards N. Delivering the benefits of digital health care. London: Nuffield Trust; 2016:5–6.
- Jagannatha G, Yasmin A, Sanjiwani N, Pradnyana I, Kamardi S. Role of telecardiology in prevent mortality and improve quality of life in patients with chronic heart failure: a meta-analysis of randomized controlled trials. *Eur J Prev Cardiol*. 2022. https://doi.org/10.1093/eurjpc/zwac056.310.
- Jalali MS, Landman A, Gordon WJ. Telemedicine, privacy, and information security in the age of COVID-19. J Am Med Inform Assoc: JAMIA. 2021;28(3): 671–672. https://doi.org/10.1093/jamia/ocaa310.
- Javaid M, Haleem A, Singh RP, Suman R. Towards insighting cybersecurity for healthcare domains: a comprehensive review of recent practices and trends. Cyber Secur Appl. 2023, 100016.
- Jiang C, Strohbehn G, Dedinsky R, et al. Teleoncology for veterans: high patient satisfaction coupled with positive financial and environmental impacts. *JCO Oncol Pract*. 2021;17:e1362–e1374. https://doi.org/10.1200/OP.21.00317.
- Jin MX, Kim SY, Miller LJ, Behari G, Correa R. Telemedicine: current impact on the future. Cureus. 2020;12(8).
- Jones JF, BRENNAN PF. Telehealth interventions to improve clinical nursing of elders. Annu Rev Nurs Res. 2002;20(1):293–322.

- Jumreornvong O, Yang E, Race J, Appel J. Telemedicine and Medical Education in the Age of COVID-19. *Acad Med.* 2020;95(12):1838–1843. https://doi.org/ 10.1097/ACM.0000000000003711. PMID: 32889946; PMCID: PMC7489227.
- Kane H, Baumgart JG, El-Hage W, et al. Opportunities and challenges for professionals in psychiatry and mental health care using digital technologies during the COVID-19 pandemic: systematic review. *JMIR Hum Factors*. 2022;9(1), e30359.
- Kho J, Gillespie N, Martin-Khan M. A systematic scoping review of change management practices used for telemedicine service implementations. BMC Health Serv Res. 2020;20:1–16.
- 84. Khodadad-Saryazdi A. Exploring the telemedicine implementation challenges through the process innovation approach: a case study research in the French healthcare sector. *Technovation*. 2021;107, 102273.
- Khurrum M, Asmar S, Joseph B. Telemedicine in the ICU: innovation in the Critical Care Process. J Intensive Care Med. 2020;36:1377–1384. https://doi.org/10.1177/ 0885066620968518
- Kilinc D, Gel E, Demirtaş A. Intelligent teletriage and personalized routing to manage patient access in a neurosurgery clinic. IISE Trans Healthc Syst Eng. 2021; 11:224–239. https://doi.org/10.1080/24725579.2021.1921081.
- Kobeissi MM, Ruppert SD. Remote patient triage: shifting toward safer telehealth practice. J Am Assoc Nurse Pr. 2021 Sep 13;34(3):444. https://doi.org/10.1097/ JXX.0000000000000655. Epub ahead of print. PMID: 34519672; PMCID: PMC8893128
- Koltowski L, Balsam P, Glowczynska R, et al. Kardia mobile applicability in clinical practice: a comparison of Kardia Mobile and standard 12-lead electrocardiogram records in 100 consecutive patients of a tertiary cardiovascular care center. *Cardiol* J. 2021;28(4):543–548. https://doi.org/10.5603/CJ.a2019.0001. Epub 2019 Jan 15. PMID: 30644079; PMCID: PMC8276994.
- Krist AH, Tong ST, Aycock RA, Longo DR. Engaging patients in decision-making and behavior change to promote prevention. Stud Health Technol Inf. 2017;240: 284–302. PMID: 28972524; PMCID: PMC6996004.
- Kristoffersson A, Lindén M. Wearable sensors for monitoring and preventing noncommunicable diseases: a systematic review. *Information*. 2020;11(11):521. https://doi.org/10.3390/info11110521 (MDPI AG. Retrieved from).
- Kruse C, Heinemann K. Facilitators and barriers to the adoption of telemedicine during the first year of COVID-19: systematic review. *J Med Internet Res.* 2022;24 (1), e31752. https://doi.org/10.2196/31752.
- Li Uchong, Qinghui Liu. A comprehensive review study of cyber-attacks and cyber security; emerging trends and recent developments. ISSN 2352-4847 Energy Rep. 2021;Volume 7:8176–8186. https://doi.org/10.1016/j.egvr.2021.08.126.
- Liang H, Lin L, Chang C, Wu F, Yu S. Effectiveness of a nurse-led tele-homecare program for patients with multiple chronic illnesses and a high risk for readmission: a randomized controlled trial. J Nurs Sch: Publ Sigma Theta Tau Int Honor Soc Nurs. 2021. https://doi.org/10.1111/jnu.12622.
- Lin CH, Lee KW, Chen TC, et al. Quality and safety of Telemedicine in acute ischemic stroke: early experience in Taiwan. J Formos Med Assoc. 2022;121(1): 314–318.
- Longhini J, Rossettini G, Palese A. Massive open online courses for nurses' and healthcare professionals' continuous education: a scoping review. *Int Nurs Rev.* 2021. https://doi.org/10.1111/inr.12649.
- Maddukuri S, Patel J, Lipoff JB. Teledermatology addressing disparities in health care access: a review. Curr Dermatol Rep. 2021;10(2):40–47. https://doi.org/ 10.1007/s13671-021-00329-2. Epub 2021 Mar 12. PMID: 33747638; PMCID: PMC7953516.
- Majidian M, Tejani I, Jarmain T, Kellett L, Moy R. Artificial intelligence in the evaluation of telemedicine dermatology patients. *J Drugs Dermatol: JDD*. 2022;21 (2):191–194. https://doi.org/10.36849/jdd.6277.
   Mann DM, Chen J, Chunara R, Testa PA, Nov O. COVID-19 transforms health care
- Mann DM, Chen J, Chunara R, Testa PA, Nov O. COVID-19 transforms health care through telemedicine: evidence from the field. J Am Med Inform Assoc. 2020;27(7): 1132–1135.
- Marino M, Rienzo M, Serra N, et al. Mobile screening units for the early detection of breast cancer and cardiovascular disease: a pilot telemedicine study in Southern Italy. Telemed J e-Health: J Am Telemed Assoc. 2020. https://doi.org/10.1089/ tmj.2018.0328.
- 100. Mars M. Tele-education in south africa. Front Public Health. 2014;2:173.
- 101. Matthew-Maich N, Harris L, Ploeg J, et al. Designing, implementing, and evaluating mobile health technologies for managing chronic conditions in older adults: a scoping review. JMIR mHealth uHealth. 2016;4(2), e5127.
- 102. Mehraeen E, SeyedAlinaghi S, Heydari M, et al. Telemedicine technologies and applications in the era of COVID-19 pandemic: A systematic review. *Health Inform J.* 2023 Apr-Jun;29(2), 14604582231167431. https://doi.org/10.1177/14604582231167431. PMID: 37076954; PMCID: PMC10116201.
- Miller J, Jones E. Shaping the future of teledermatology: a literature review of patient and provider satisfaction with synchronous teledermatology during the COVID-19 Pandemic. Clin Exp Dermatol. 2022. https://doi.org/10.1111/ ced.15320.
- Moore, G., Toit, A., Jameson, B., Liu, A., & Harris, M. (2020). The effectiveness of virtual hospitals. https://doi.org/10.57022/lwxq3617.
- 105. Moreno S, Quintero A, Ochoa C, Bonfante M, Villareal R, Pestana J. Remote monitoring system of vital signs for triage and detection of anomalous patient states in the emergency room (August). 2016 XXI symposium on signal processing, images and artificial vision (STSIVA). IEEE; 2016:1–5 (August).
- Morris M, Mulhall C, Murphy PJ, Eppich WJ. Interdisciplinary collaborative working on surgical ward rounds: reality or rhetoric? A systematic review. J Interprof Care. 2023;37(4):674–688.

- Mounessa J, Chapman S, Braunberger T, et al. A systematic review of satisfaction with teledermatology. *J Telemed Telecare*. 2017;24:263–270. https://doi.org/ 10.1177/1357633×17696587.
- 108. Munshi MN, Florez H, Huang ES, et al. Management of diabetes in long-term care and skilled nursing facilities: a position statement of the American Diabetes Association. *Diabetes care*. 2016;39(2):308–318.
- Naik S, Manjunatha N, Kumar C, Math S, Moirangthem S. Patient's perspectives of telepsychiatry: the past, present and future. *Indian J Psychol Med.* 2020;42: 1028–107S. https://doi.org/10.1177/0253717620963341.
- 110. Newman L, Bidargaddi N, Schrader G. Service providers' experiences of using a telehealth network 12 months after digitisation of a large Australian rural mental health service. Int J Med Inform. 2016;94:8–20.
- Nguyen M, Waller M, Pandya A, Portnoy J. A review of patient and provider satisfaction with telemedicine. Curr Allergy Asthma Rep. 2020;20:1–7.
- 112. Nguyen-Huynh MN, Klingman JG, Avins AL, et al. KPNC Stroke FORCE Team. Novel Telestroke Program Improves Thrombolysis for Acute Stroke Across 21 Hospitals of an Integrated Healthcare System. Stroke. 2018 Jan;49(1):133–139. https://doi.org/10.1161/STROKEAHA.117.018413. Epub 2017 Dec 15. PMID: 29247142; PMCID: PMC5753819.
- 113. Nittari G, Khuman R, Baldoni S, et al. Telemedicine practice: review of the current ethical and legal challenges. *Telemed e-Health*. 2020;26(12):1427–1437.
- Norris C, Nandy P. The nurse licensure compact's effect on telemedicine usage. *J Patient Exp.* 2023;10, 23743735231179060. https://doi.org/10.1177/ 23743735231179060.
- Ohligs M, Stocklassa S, Rossaint R, Czaplik M, Follmann A. Employment of telemedicine in nursing homes: clinical requirement analysis, system development and first test results. Clin Interv Aging. 2020;15:1427–1437. https://doi.org/ 10.2147/CIA.5260098.
- 116. Olowoyo KS, Esan DT, Adeyanju BT, Olawade DB, Oyinloye BE, Olowoyo P. Telemedicine as a tool to prevent multi-drug resistant tuberculosis in poor resource settings: Lessons from Nigeria. J Clin Tuberc Other Mycobact Dis. 2024, 100423.
- Otto C, Wang J, Walters C, et al. Tele-oncology at MSK: delivering innovative, patient-centered care. *J Clin Oncol*. 2018. https://doi.org/10.1200/ JCO.2018.36.30 SUPPL.272.
- Pala P, Bergler-Czop BS, Gwiżdż JM. Teledermatology: idea, benefits and risks of modern age - a systematic review based on melanoma. *Post Dermatol Alergol.* 2020 Apr;37(2):159–167. https://doi.org/10.5114/ada.2020.94834. Epub 2020 May 5. PMID: 32489348; PMCID: PMC7262815.
- Parimbelli E, Bottalico B, Losiouk E, et al. Trusting telemedicine: a discussion on risks, safety, legal implications and liability of involved stakeholders. Int J Med Inf. 2018 Apr 1;112:90–98.
- Parsons J. The telemedical imperative. Bioethics. 2020;35:298–306. https://doi. org/10.1111/bioe.12847.
- Picozzi P, Nocco U, Puleo G, Labate C, Cimolin V. Telemedicine and robotic surgery: a narrative review to analyze advantages, limitations and future developments. *Electronics*. 2023. https://doi.org/10.3390/electronics13010124
- Poghosyan L, Norful AA, Ghaffari A, George M, Chhabra S, Olfson M. Mental health delivery in primary care: the perspectives of primary care providers. *Arch Psychiatr Nurs*. 2019;33(5):63–67. https://doi.org/10.1016/j.apnu.2019.08.001.
- Radhakrishnan K, Xie B, Berkley A, Kim M. Barriers and facilitators for sustainability of tele-homecare programs: a systematic review. *Health Serv Res*. 2016;51(1):48–75. https://doi.org/10.1111/1475-6773.12327.
- 2016;51(1):48–75. https://doi.org/10.1111/1475-6773.12327.
   124. Ramirez AV, Ojeaga M, Espinoza V, et al. Telemedicine in minority and scocioecnomically disadvantaged communities amidst COVID-19 pandemic. Otolaryngol Head Neck Surg. 2021;164:91–92.
- 125. Rashvand HF, Hsiao KF. Integrating Telemedicine and Telehealth—Advancing Health at a Distance. In TeleMedicine and Electronic Medicine. CRC Press; 2018:3–32.
- 126. Record JD, Ziegelstein RC, Christmas C, Rand CS, Hanyok LA. Delivering personalized care at a distance: how telemedicine can foster getting to know the patient as a person. *J Pers Med.* 2021 Feb 17;11(2):137. https://doi.org/10.3390/jpm11020137. PMID: 33671324; PMCID: PMC7922915.
- Rockwell KL, Gilroy AS. Incorporating telemedicine as part of COVID-19 outbreak response systems. Am J Manag Care. 2020 Apr 1;26(4):147–148.
- 128. Rutledge CM, Gustin T. Preparing nurses for roles in telehealth: now is the time!. OJIN: Online J Issues Nurs. 2021;Vol. 26(No. 1). Manuscript 3.
- Rutledge CM, Kott K, Schweickert PA, Poston R, Fowler C, Haney TS. Telehealth and eHealth in nurse practitioner training: current perspectives. Adv Med Educ Pract. 2017;8:399–409. https://doi.org/10.2147/AMEP.S116071.
- Saeed SA, Masters RM. Disparities in health care and the digital divide. Curr Psychiatry Rep. 2021;23:1–6.
- Schade E, Elkaddoum R, Kourie H. The psychological challenges for oncological patients in times of COVID-19 pandemic: telemedicine, a solution? *Future Oncol.* 2020. https://doi.org/10.2217/fon-2020-0552.
- 132. Shachar C, Engel J, Elwyn G. Implications for telehealth in a postpandemic future: regulatory and privacy issues. *Jama*. 2020;323(23):2375–2376.
- Shalowitz D, Smith A, Bell M, Gibb R. Teleoncology for gynecologic cancers, 7 Gynecol Oncol. 2015;139(1):172. https://doi.org/10.1016/j.ygyno.2015.06.042.
- 134. Sica M, Meziere J, Amparore D, Verri P, Piramide F. Telesurgery with cognitive 3D model guidance during robot-assisted partial nephrectomy: first experience across Europe. Uro-Technol J. 2023. https://doi.org/10.31491/utj.2023.03.007.

- 135. Smith AC, Thomas E, Snoswell CL, et al. Telehealth for global emergencies: Implications for coronavirus disease 2019 (COVID-19). J Telemed telecare. 2020;26 (5):309–313.
- Solimini R, Busardò FP, Gibelli F, Sirignano A, Ricci G. Ethical and legal challenges of telemedicine in the era of the COVID-19 pandemic. *Medicina*. 2021;57(12):1314.
- 137. Steele Gray C, Barnsley J, Gagnon D, et al. Using information communication technology in models of integrated community-based primary health care: learning from the iCOACH case studies. *Implement Sci.* 2018;13(1):1–14.
- Strnad K, Shoulders B, Smithburger P, Kane-Gill S. A Systematic Review of ICU and Non-ICU clinical pharmacy services using telepharmacy. *Ann Pharmacother*. 2018; 52:1250–1258. https://doi.org/10.1177/1060028018787213.
- 139. Tabacof L, Wood J, Mohammadi N, Link KE, Tosto-Mancuso J, Dewil S, et al. Remote patient monitoring identifies the need for triage in patients with acute COVID-19 infection. *Telemed e-Health*. 2022;28(4):495–500.
- 140. Tan, A.J.Q., Chua, W.L., McKenna, L., Tan, L.L.C., Lim, Y.J., & Liaw, S.Y. (2023). Interprofessional collaboration in telemedicine for long-term care: An exploratory qualitative study. Journal of Nursing Scholarship.
- 141. Tan, A.J., Rusli, K.D., McKenna, L., Tan, L.L., & Liaw, S.Y. (2021). Telemedicine experiences and perspectives of healthcare providers in long-term care: A scoping review. Journal of telemedicine and telecare, 1357633×211049206.
- 142. Thomas EE, Taylor ML, Banbury A, et al. Factors influencing the effectiveness of remote patient monitoring interventions: a realist review. BMJ Open. 2021;11(8), e051844.
- 143. Tolentino VR, Derevlany L, DeLaMothe C, Vick S, Chalyavski L. The effects of the COVID-19 pandemic on risk management practice: a report from the epicenter of the epicenter in New York City. J Healthc Risk Manag. 2021;40(4):46–57.
- Ullah M, Hamayun S, Wahab A, et al. Smart technologies used as smart tools in the management of cardiovascular disease and their future perspective. *Curr Probl Cardiol*. 2023;48(11), 101922.
- 145. Uscher-Pines L, Raja P, Qureshi N, Huskamp HA, Busch AB, Mehrotra A. Use of tele-mental health in conjunction with in-person care: a qualitative exploration of implementation models. *Psychiatr Serv.* 2020;71(5):419–426.
- 146. van der Kamp M, de Graaf P, Geven I, et al. Remote patient monitoring and teleconsultation to improve health outcomes and reduce health care utilization of pediatric asthma (ALPACA Study): protocol for a randomized controlled effectiveness trial. JMIR Res Protoc. 2023;12(1), e45585.
- Van Houwelingen CT, Moerman AH, Ettema RG, Kort HS, Ten Cate O. Competencies required for nursing telehealth activities: a Delphi-study. *Nurse Educ Today*, 2016;39:50–62.
- Varma N, Ricci RP. Impact of remote monitoring on clinical outcomes. J Cardiovasc Electrophysiol. 2015;26(12):1388–1395.
- Vegesna A, Tran M, Angelaccio M, Arcona S. Remote patient monitoring via non-invasive digital technologies: a systematic review. *Telemed J E Health*. 2017 Jan;23 (1):3–17. https://doi.org/10.1089/tmj.2016.0051. Epub 2016 Apr 26. PMID: 27116181: PMCID: PMCS240011.
- Vehko, T., Ruotsalainen, S., & Hyppönen, H. (2019). E-health and e-welfare of Finland: Check point 2018.
- Velentza O, Aouant N. The contribution of mental health nurse to telepsychiatric applications. *Ment Health: Glob Chall J.* 2019;1(1):85–96. https://doi.org/ 10.32437/mberi.viii.36
- 152. Vo A, Gustafson D. Telepharmacy in oncology care: a scoping review. *J Telemed Telecare*. 2020;29:165–176. https://doi.org/10.1177/1357633×20975257.
- 153. Wali R, Aljohani H, Shakir M, Jaha A, Alhindi H. Job satisfaction among nurses working in King Abdul Aziz Medical City primary health care centers: a crosssectional study. *Cureus*. 2023 Jan 11;15(1), e33672. https://doi.org/10.7759/ cureus.33672. PMID: 36788903: PMCID: PMC9918752.
- 154. Wang H, Yuan X, Wang J, Sun C, Wang G. Telemedicine maybe an effective solution for management of chronic disease during the COVID-19 epidemic. Prim Health Care Res Dev. 2021;22. https://doi.org/10.1017/S1463423621000517.
- Washington B, Robinson A, Mike T, Ruley M, Coustasse A. Telepsychiatry: access in rural areas. Int J Heal Inf Syst Inform. 2021;16:1–14. https://doi.org/10.4018/ ijhisi.295820.
- 156. Watzlaf VJ, Zhou L, DeAlmeida DR, Hartman LM. A systematic review of research studies examining telehealth privacy and security practices used by healthcare providers. Int J Telerehabilitation. 2017;9(2):39.
- 157. Witkowska-Zimny M, Nieradko-Iwanicka B. Telemedicine in Emergency Medicine in the COVID-19 Pandemic-experiences and prospects-a narrative Review. *Int J Environ Res Public Health*. 2022 Jul 5;19(13):8216. https://doi.org/10.3390/ijerph19138216. PMID: 35805873; PMCID: PMC9266315.
- 158. Wong L, Tokumaru S, Boehm L, et al. From a distance: nursing and pharmacy students use teamwork and telehealth technology to provide interprofessional care in a simulation with telepresence robots. *J Interprof Educ Pract.* 2021. https://doi.org/10.1016/j.xjep.2020.100407.
- Yamano T, Kotani K, Kitano N, et al. Telecardiology in rural practice: global trends. Int J Environ Res Public Health. 2022;19. https://doi.org/10.3390/ijerph19074335.
- 160. Zakaria A, Maurer T, Su G, Amerson E. Impact of teledermatology on the accessibility and efficiency of dermatology care in an urban safety-net hospital: a pre-post analysis. J Am Acad Dermatol. 2019;81(6):1446–1452. https://doi.org/ 10.1016/j.jaad.2019.08.016.