



This tool provides information to facilitate chiropractic clinical practice via telehealth

Telehealth examination



1. Key Considerations and Requirements:

- **Location:** private and quiet environment, good lighting, space and flooring (if required).
- **Technology:** charged electronics, adequate internet connection speed and signal strength, headphones. Have patient's phone number in case connection is lost.
- **Clinician Props:** informed consent form, access to supporting documents (images, videos).
- **Patient Props:** loose clothing for movement, short/removable clothing for visual inspection, space and flooring (if required).
- **Emergency contact:** obtain local emergency contact information in case an emergency arises (e.g., family member).
- **Unique telehealth considerations:** verification of identity, limitations to examination, clinician disclosure and patient consent if being recorded, discuss billing options.
- **Children/adolescent considerations:**
 - Ask parent/guardian to prepare child's weight, medication list, setting up toys to observe movements (if required).
 - Always confirm the identity of the parent/guardian and the patient. For new consultations, clarify parental responsibility.



2. Virtual Examination

- *Set the stage; explain the benefits and limitations of the telehealth appointment.*
- *Discuss the patient's goals and expectations.*
- Conduct a comprehensive patient history.
- Use patient-reported outcome measures addressing pain intensity, function, quality of life, and self-rated recovery. Consider sending patient-reported outcome measures to patient before consultation.
- Rule out major structural or other pathologies (red flags). See [guidelines](#).
- Identify and assess other conditions and co-morbidities.
- Address prognostic factors that may delay recovery.
- Identify if in-person, referral, or emergency management is required.

Ensuring care is patient-centered:

- Use a biopsychosocial approach to care that takes into account the individual patient's context
- Listen attentively to patients' concerns, health goals, values and preferences
- Communicate effectively (active listening, eye contact) and engage in shared decision-making with the patient

A modified virtual exam may include:

- Observe appearance and emotional status (e.g., does the patient look well, unkempt, worried, well-rested, intoxicated; signs of physical trauma)
- Observe posture, range of motion, movement patterns, and muscle strength under your instruction (e.g., demonstrate how to go through the ranges of motion to the patient)
- Ask patient to self-palpate or self-examine under your guidance

Once major pathology has been ruled out; and based on the interview and modified physical examination, you may classify/diagnose the patient's condition with emphasis on a clinical impression vs. frank diagnosis (e.g., non-specific neck, back pain)

Incorporate one or more valid and reliable outcome measurements when assessing and monitoring patients

- [Self-rated Recovery Question](#)
- [Patient-specific Functional Scale](#)
- [Fear-Avoidance Beliefs Questionnaire](#)
- [Numeric Pain Rating Scale](#)
- [World Health Organization Disability Assessment Schedule](#)
- [Pittsburgh Sleep Quality Index](#)

Visit our website for more [outcome measurements](#)



3. Management

- Following the examination, communicate your clinical impression to the patient.
 - Promote shared understanding and shared decision-making regarding the patient’s plan of care.
 - Communicate your recommendations.
- Offer information on nature, management, and the course of complaint. See [patient handouts](#).
- Discuss physical activity and exercise. See [exercise videos](#).
- Provide self-management strategies.
- Support patients and address factors that may be contributing to the patient’s experience. See [patient resources](#).

Provide education and self-management strategies:

- Promote healthy lifestyle behaviours (e.g., activity, nutrition, sleep) / behaviour modification
- Promote active coping strategies for pain, anxiety, stress, and depressive symptoms
- Promote and teach mindfulness practices
- Teach pacing activities
- Support patients to self-manage through techniques such as cognitive behavioural therapy (CBT) and motivational interviewing if the chiropractor is trained in these approaches (or refer to other healthcare providers qualified in providing these services)
- Direct patients to various resources (Youtube, apps such as Insight Timer, Calm, etc.)

Many of the behavioural components of self-management are not only potentially helpful for managing pain and musculoskeletal conditions, but likely also for emotional distress related to the current pandemic

- Educate patients on the public health measures related to the current pandemic (as outlined by national and provincial health authorities)
- Help patients locate online social support programs

Recommending Physical activity and Exercise

- Prescribe exercise (e.g., maintenance of usual activities, mobility, range of motion, stretching, strengthening, aerobic or general exercises). See [guideline for patients who are pregnant](#)
- Demonstrate and/or observe performance of exercise
- Provide written, image or video exercise references. See [exercise forms](#)

4. Reevaluation and discharge

- Remind patients to contact a healthcare provider if certain signs and symptoms (red flags) occur.
- Determine the preferred manner of receiving further information (e.g., exercise video links) and check-ins.
- Reassess the patient at every visit to determine if: (1) additional care is necessary; (2) the condition is worsening; or (3) the patient has recovered.
- Communicate the patient’s apparent progress at subsequent visits
- Monitor for any emerging factors that may delay recovery.

5. Referrals and collaboration

- Refer the patient to an appropriate healthcare provider for further evaluation at any time during their care if they develop worsening symptoms and new physical or psychological symptoms.

