

Malaysian Medical Council Advisory on Virtual Consultation
(during the Covid19 pandemic)

1. This Advisory is guided by the Medical Act 1971 (Amended 2012) which regulates the registration and practice of medicine in Malaysia and the Malaysian Medical Council's Code of Professional Conduct.
2. Definitions:
Virtual Consultation is a form of Telemedicine.
Telemedicine: a medical service provided remotely via information and communication technology.
Remotely: without physical contact and does not necessarily involve long distances.
In-person: Physical attendance with the Physician.
3. The role of the Council is to regulate physicians, not technology. The Council reminds physicians that the use of technology does not alter the ethical, professional and legal requirements in the provision of care.
4. Malaysian Medical Council's jurisdiction is within this country only and physicians must ensure appropriate liability protection is in place to provide indemnity for malpractice.
5. In providing medical care using telecommunications technologies, physicians are advised that they must:
 - I. possess adequate training and competency to manage patients through telemedicine.
 - II. follow all ethical and legal requirements such as to obtain valid informed consent from the patient.
 - III. ensure that the physician's identity, place of practice and registration status are made known to the patient, and the identity of the patient is confirmed at each consultation.
 - IV. ensure that the identities of all other participants involved in the telemedicine encounter are disclosed to and approved by the patient, and documented in the patient record.
 - V. ensure that both the physician-site and the patient-site are using appropriate technology that complies with legal requirements regarding privacy and security and accreditation standards where required.
6. Due considerations must be given to the safety and maintaining a high standard of patient care:
 - I. consider whether the telemedicine medium affords adequate assessment of the presenting problem, and if it does not, arrange for a timely in-person assessment.
 - II. explain the appropriateness, limitations, and privacy issues related to telemedicine to the patient.

- III. provide an appropriate medical assessment based on the current symptoms or condition, past history, medications and limited examination possible.
 - IV. create and maintain medical records of the consultation, in accordance with professional and legal requirements.
 - V. ensure patients have enduring access to their medical records and that medical records are available to other health care professionals for the provision of ongoing patient care.
7. Ensuring follow-up and referring to other facilities and colleagues if care is not adequate:
- I. communicate with the referring and other treating physicians and provide follow-up and after-hours care as medically appropriate.
 - II. ensure patients referred to specialists are adequately investigated and treated before referral, and are advised about accessing primary care following specialist assessment and treatment.
 - III. ensure adherence to the same obligations for patient follow up in telemedicine as is expected with in-person consultation.
8. Limitations of Telemedicine Virtual Consultation:
- I. Exercise caution when providing prescriptions or other treatment recommendations to patients whom they have not personally examined.
 - II. Ensure that patients with cognitive disorders, intoxication or language barriers be seen at a physical facility.
9. Doctor can only have virtual consultation with a person who is already his/her patient. This can be seen as a continuation of care.
10. Notwithstanding 1-9 above, there is a distinction between advice for wellness during a telecommunication and a telemedicine virtual consultation.
11. Special circumstance:
- I. When the health care delivery is affected by any national epidemic or global pandemic, or any other movement restrictions imposed on the public by the government; the use of communication technology can improve the access to care. This is to avoid patient coming to and congesting the clinic, and for the patient's own safety.
 - II. Under such special circumstances, the practice of telemedicine virtual consultation is still subjected to ethical considerations whereby the rights of patients are protected.
 - III. Under normal circumstances, we make ethical decisions after open dialogue to achieve mutual understanding.
 - IV. In this unprecedented time where the situation is seen to be very urgent, rapidly changing, and where there is a fine balance between public safety and individual health, it is equally important for Medical Practitioners to have the virtues of accountability and truth telling.
 - V. The Code of Professional Conduct clearly says a physical examination is ethically mandatory.

- VI. However a non-physical contact virtual consultation makes a physical examination incomplete other than the visual and auditory observation.
- VII. It is often possible to make an accurate diagnosis from just the history, and a limited visual and auditory observation.
- VIII. If a Registered Medical Practitioner under current circumstances conducting such telemedicine virtual consultation feels this is so in good faith, then appropriate treatment can be initiated based on such, without the need for a physical examination in person.
- IX. Under this special circumstance, the above applies only for a limited time during the situations mentioned in (I.).

Reference: 1. <https://fmrac.ca/fmrac-framework-on-telemedicine/>