10 THINGS ABOUT:
EMAIL

1. Patients are used to having the ability to communicate electronically with friends and other service providers and thus it is no surprise that they also want to communicate with their healthcare providers this way as well. While the asynchronous nature of email has made it a convenient way for patients and physicians to communicate, care must be taken to avoid various risks.

2. As all exchanges are written (and thus instantly documented) there may be the potential for fewer communication errors and greater information retention on the part of patients. Email is particularly useful for sending such things as: appointment reminders, instructions, educational materials, referrals, etc.

3. Email is relatively safe for the largely administrative uses discussed above; however, care should be taken when engaging in actual treatment of a patient via email. While it might be acceptable to utilize email for brief status updates, email should be used only to supplement more personal encounters rather than to replace them. (See AMA Ethics Opinion 2.3.1 Electronic Communications with Patients). Patients must understand that email is never to be used to report such things as suicidal ideation or reactions to medication.

4. As can occur when communicating with friends, email messages can be misconstrued without facial and verbal cues available in a face to face conversation. Remember to keep email messages with patients professional and to the point.

5. Email is susceptible to confidentiality breaches. For example, if you receive a message from a patient, how do you know that it is really from the patient and not a family member or other individual with access to your patient's computer who is trying to learn about your patient's health status? Consider configuring the system so that patients must utilize a password to send or receive email and so that patients must send confirmation of receipt of emails sent by your office.

6. If you choose to allow patients to communicate with you via email, set up policies within your office for handling email. These might include: establishing a response time for messages and coverage during weekends, holidays, etc., a method to triage messages to ensure that they are directed to the correct member of the office staff, and procedures for copying emails to patient charts.

7. Ask the patient to sign a consent form acknowledging the benefits, potential risks and limitations regarding the use of email. If you are using unencrypted email, the patient should specifically be told of the potential risk of breach and asked to acknowledge his/her consent to its use. This should be periodically updated to confirm patient's continued comfort with its use and to confirm patient's preferred email address.

8. There is the potential for the inadvertent creation of a treatment relationship through email. Care must be given in replying to unsolicited emails so as not to give the impression that medical advice is being given. Only use email with established patients. If an email is received from a non-patient, a polite standard response advising the writer that you do not address such matters via email and inviting them to make an appointment in your office is appropriate.

9. Another potential problem along these same lines is the potential for practicing medicine without a license if the person contacting your office is located in a state in which you do not hold a license. Treatment is deemed to occur where the patient is physically located at the time it occurs. Practicing without a license is deemed a criminal act in many states which may preclude insurance coverage should a claim be filed against the physician for advice given.

10. Not every patient will be appropriate to communicate with via email. While many will respect your guidelines, you will likely have others who will want to use email to avoid a trip to your office, will bombard you with lengthy messages, or will try to engage you socially. Carefully select which patients will be allowed to use this service.

Compliments of:

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