

Telemedicine Devices

How it works

State of the art 'virtual presence' devices allow a specialist clinician to deliver critical support to colleagues without being physically at the patient's bedside.

The versatility of the devices allow for them to be effectively deployed over a range of healthcare settings – from neonatology to routine clinics, ensuring that you can maximise the effectiveness of your workforce.

Current examples of usage include large multi-site NHS Trusts, such as University Hospitals Leicester NHS Trust (UHL), who have optimised their available clinicians, cut down travel time between sites, reduced emissions and increased patient-facing time – improving chances of earlier discharge.

Devices have also allowed for specialist consultants to assist in the resuscitation of a baby from a different hospital and to assist a cardiac ICU in the care of paediatric cardiology cases, despite there being no ICU on site.

[Click here to watch our short explainer video.](#)



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Key benefits

- ✓ Instant access to specialist advice from anywhere in the world
- ✓ Enables equity of access to services across a region (e.g. specialist care, mental health)
- ✓ Improves patient care through increased consultant-led care
- ✓ Mobilises and maximises the efficiency of your workforce
- ✓ Increases opportunities for learning from senior and specialist consultants
- ✓ Minimal training and set-up required – the single virtual care platform enables all devices to be connected on a universally accessible network for enhanced communication
- ✓ Opportunity to provide your services to other regions or countries (e.g. patient consultations in the Middle East)



Telemedicine Devices | In Practice

University Hospitals Leicester NHS Trust

“With the Teladoc robot I can be doing a ward round on one site in the morning and have a clinic booked immediately afterwards in the afternoon at another. The system allows for greater efficiency because I’m not having to add travel time or risk being delayed in traffic. This means I’m able to spend more time with patients and I have more opportunity to discuss their plans and care. I am also able to review patients who are admitted to my ward between my formal ward rounds and this means that they may be discharged earlier.”

“The image and sound quality of the system are excellent and allow me to see and talk to the patient, alongside onsite junior doctors, while having all the relevant medical records at hand – something you’re not able to do via a phone call. Another potential benefit to patients is the increased access to specialists on other sites, including outside of the trust or across the region in future which could mean fewer patients need to be admitted or transferred between hospitals.”

Dr Steve Jackson Consultant, University Hospitals Leicester NHS Trust

[Click here to read the full case study.](#)

Telemedicine Devices | In Practice

Alder Hey Children's and Liverpool Women's Hospital

When the team lost seven of their 14 consultants due to shielding or sickness, Dr Dewhurst remarks, “[the telemedicine devices] kept us going.”

“We have actually seen the care for our babies enhanced by the telemedicine system. Busy specialists have been able to be at the baby’s cot side within minutes of being contacted, providing their expert opinion and discussing with the families as if they were in the room. Parents have fed back how they have been able to build a relationship with consultants who visited them regularly, despite not meeting them in person. Telemedicine has now become part of our normal care for babies across the city.”

Dr Chris Dewhurst, Clinical Lead, Clinical Director for the Liverpool Neonatal Partnership

[Click here to read the full case study.](#)