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Doctor–patient communication in surgical practice during the coronavirus (COVID-19) pandemic

Editor

COVID-19 is a new respiratory disease that has become a pandemic, involving whole world^{1,2}. Hospitals are now a hub for this disease and patients are advised to avoid hospitals as far as possible^{3,4}. Many healthcare workers are infected with SARS-CoV-2. This virus can spread from an infected doctor to patients or colleagues and does not respect any boundaries. Moreover, immunocompromised patients are at a greater risk of this potentially life-threatening contagious disease. Recommendations of social distancing and home isolation to limit the spread of coronavirus are major factors limiting patients' communication with doctors regarding their disease.


This has led us to think about an alternate safe form of doctor–patient communication that is not detrimental for doctors, patients or communities; and moreover, is practical and affordable for the majority of people. WhatsApp (WhatsApp Inc., Mountain View, California, USA) is an emerging mobile messaging app familiar to many people around the world. Electronic communications including calls, messages, pictures, videos and voice messages can be sent and received by individuals or groups⁵. Patients can consult their doctor using phone/video calls on WhatsApp, and also share pho-

tographs of infected/diseased parts of the body, which can provide a visual clue for the doctor treating their patient. Patients' test reports can also be shared via WhatsApp. Moreover, reassurance regarding benign disease can be given to any patient and a proper management plan shared. Drug treatments can be started accordingly. Even in developing countries like Pakistan, there is usually someone within a family who can use a smartphone and communicate on WhatsApp, making telemedicine effective. Patients with complicated or serious disease, or those having problems describing their symptoms or using WhatsApp can be called for a hospital visit. This approach will limit the number of patients visiting hospitals, saving time, manpower and resources for more serious cases. Moreover, it will also limit the spread of coronavirus. This strategy also allows doctors to work from home, avoiding unnecessary hospital duties.

In the wake of the COVID-19 pandemic, Surgical Unit II at Benazir Bhutto Hospital, Rawalpindi, Pakistan has devised a telemedicine protocol under the guidance of Professor Muhammad Hanif, as follows:

- 1 Patients discharged from a ward or emergency department are given two WhatsApp phone numbers to contact for follow-up. Follow-up is via WhatsApp and they are to come to the hospital only if advised.
- 2 Patients scheduled for elective surgery which has been delayed are advised to consult via WhatsApp and will be called for surgery once the situation is controlled.
- 3 OPD level doctors headed by consultants will be available for online consultation on WhatsApp and given phone numbers.
- 4 Patients are advised to come to hospital only in unavoidable circumstances.

Telemedicine has started on an institutional basis in various hospitals in Pakistan. Our unit has started to use WhatsApp, which is approachable and affordable to many people, to keep our patients and doctors safe while ensuring the proper provision of services.

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