Key Themes for
Digital Health Ethics

DHA
Defense Health Agency

Ethical concepts and principles are the same for digital health as other modalities of treatment delivery.

i **For more information:** https://Health.mil/ConnectedHealthEducation

---

1 Standard of Care

- Use digital health only when the standard of care dictates it is sufficient; do not use digital health if treatment cannot meet standard of care.
- The same laws and standards that apply to in-person care are applicable; digital health care should enhance (not hinder) care.
- ⚠ *Digital health is an option. If an in-person exam will increase patient safety (compared to a virtual visit), use standard care.*

2 Provider Competence

- Assess technological capabilities, especially for ongoing care (e.g., strengths, needs, risks, and challenges).
- Assess and accommodate clinical factors and patient capacity for using and understanding technology.
- ⚠ *Technology isn't a fit for every patient. Discuss options with the patient before scheduling a virtual visit or prescribing apps, podcasts, and online tools.*

3 Patient Capability

- Providers only practice within area of competence when using technology; it is the provider's ethical obligation to pursue professional development and proficiency in the use of technology for health care delivery.
- Take note of limitations and obstacles that technology brings to a medical appointment and take steps to overcome them.
- ⚠ *Prior to using digital health, practice with a colleague. Don't use your patient encounter to learn the technology.*

4   Confidentiality

- Confirm patient's identity before proceeding with appointment.
- Use standard confidentiality practices in documentation and communication.
- Rooms where the patient is located and where the provider is located are "exam rooms" and both should be treated as such regarding confidentiality.
- Only information that is "unclassified" should be discussed via virtual visits.
- ⚠ *In virtual visits, show the patient your office to demonstrate that no one else is present. Help the patient problem solve way to speak with you without other household members present.*

5   Crisis/Emergency

- Prepare for possible emergencies or crises by:

   (1) Confirming patient's location during every visit (this can be different from home address),

   (2) Collecting emergency contact information from patient, and

   (3) Being familiar with emergency services local to the patient if needed.
- Assess risk levels of patients (in terms of the likelihood of an emergency) before and during virtual visits.
- Clinics may generate list of contraindications for patients in regards to receiving virtual care specific to their discipline/area of practice.
- ⚠ *Each provider who interacts with the patient should ask for a call-back number and current physical location.*

6   Informed Consent

- Consent includes: potential benefits, risks, and limitations of using technology, financial or other interests.
- Document consent in the patient record, even if not using written consent.
- ⚠ *At every virtual visit, provide a clear statement in the note that the patient consented to virtual care.*

7 Compliance

- Providers must be aware of applicable regulations, laws, or statutes for both the location from where the provider is practicing and the location where the patient is physically located during a virtual visit.

- ⚠ *Consult with local clinic leadership, as practice constraints may differ from prior military treatment facilities.*

8 Boundaries

- The use of real-time audio and visual indicates that a provider has established a professional relationship (in addition to professional responsibility).

- Outline specific boundaries and roles at the outset of virtual care.

- ⚠ *The "distance" involved in video, like that of social media, may encourage a more open exchange than an office professional setting would bring. Monitor and maintain boundaries.*

9 Technology Failure

- Plan for interruption of care and ensure you have a current call-back number available.

- Establish definitions of "technology failure" and ensure rules are made explicit about how much time will be allotted to troubleshoot an issue before changing modalities.

- ⚠ *You and the patient may agree that after three minutes of disconnection (or alternatively, after two disconnections), the provider will call the patient by phone.*

10 Cultural Humility

- Consider cultural differences in the delivery and use of technology.

- At a system level, ensure virtual care does not exacerbate disparities in receiving care.

- ⚠ *Don't ask a patient's child to serve as a translator. Follow Military Health System protocol.*

Codes of Ethics by Discipline

- **Counselors**

    American Counseling Association:
    https://www.counseling.org/Resources/aca-code-of-ethics.pdf

- **Marriage and Family Therapists**

    American Association for Marriage and Family Therapy:
    https://mft.nvc.vt.edu/content/dam/mft_nvc_vt_edu/Attachment%20D_Code%20of%20Ethics.pdf

- **Nurses**

    American Nurses Association:
    https://anacalif.memberclicks.net/assets/Events/RNDay/2016%20code%20of%20ethics%20for%20nurses%20-%209%20provisions.pdf

- **Occupational Therapists**

    American Occupational Therapy Association:
    https://www.aota.org/Practice/Ethics/code-of-ethics.aspx

- **Pharmacists**

    American Society of Health System Pharmacists:
    https://www.ashp.org/-/media/assets/policy-guidelines/docs/endorsed-documents/code-of-ethics-for-pharmacist.ashx

- **Physical Therapists**

    American Physical Therapy Association:
    https://www.apta.org/apta-and-you/leadership-and-governance/policies/code-of-ethics-for-the-physical-therapist

- **Physicians and Assistants**

    American Medical Association:
    https://www.ama-assn.org/sites/default/files/media-browser/principles-of-medical-ethics.pdf

- **Psychiatrists / Psychologists**

    American Psychological Association:
    https://www.apa.org/ethics/code/associations.pdf

- **Social Workers**

    National Association of Social Workers:
    https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English

This product developed by the Defense Health Agency's Connected Health Branch, November 2020.
For more information visit health.mil/connectedhealth.

Page 4 of 4