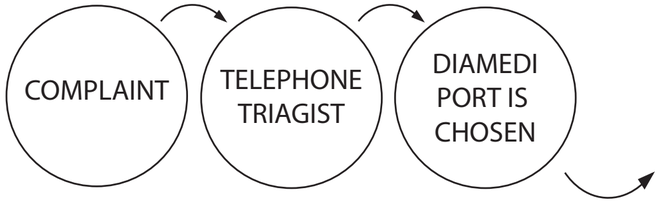
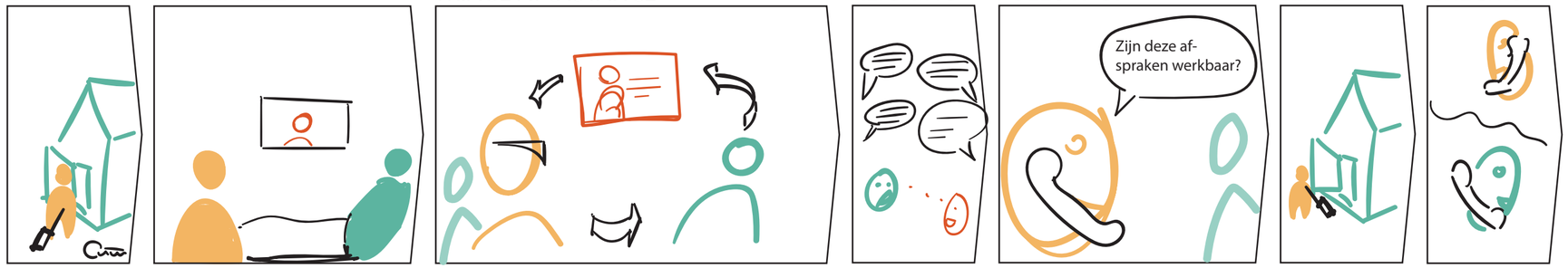
DiaMediPort

Virtual house visit with the informal caregiver





DESCRIPTION

ENTER

The technical nurse enters the elderly person's context. He opens the door with a key he obtained with an emergency code.

1. General Practitioner: transfer medical information to specialist nurse.
2. Technical Nurse: access elderly person's home.

FAMILIARIZE

The elderly person meets and starts to familiarize with the nurse.

The nurse says "I am here on behalf of the general practitioner, who is a colleague of your GP Els de Waal."
Thereby allowing the elderly person to relate to the general practitioner and starting to build trust.

Technical Nurse:
1. Starts introducing themselves to the patient.
2. Relates the General Practitioner to the patient.
3. Non-verbally make clear that you are there completely for the patient by removing your jacket.
4. Open a virtual connection to General practitioner?!
General Practitioner:
5. Introduce yourself and relate to the patient.

TRIAGE AT DISTANCE

Technical Nurse & General Practitioner:
1. Listen to the elderly person to grasp what they feel and think is going on.
2. Check assumptions from the medical history with the elderly person.
Elderly Person:
3. Answer questions.

General Practitioner:
4. Identify diagnostic actions.
5. Ask Technical Nurse to perform these.

Technical Nurse:
6. Tell Elderly Person what will happen and ask if this is ok.
7. Perform diagnostic action.

Technical Nurse:
8. Tell the General Practitioner and patient the results.
General Practitioner:
9. Reflect on this.
10. Tell the patient.

Iterate until a satisfying preliminary diagnosis is found.

ALIGNING

Elderly person and general practitioner share in a decision for a triage and follow up.
General Practitioner:
1. "Dear ms. Janssen, we have determined what is going on. It is xyz, we are going to help you with by these actions: xyz."
2. See how the Elderly Person reacts non-verbally and verbally.

FOLLOW-UP

The technical nurse takes care of the elderly person. They ask informal caregivers to bring the elderly person to visit the hospital at another moment, for example. The nurse also contacts the regular carers of the elderly person. A memento is left so the elderly person can remind themselves and regular medical professionals are able to find the gathered information.

If necessary, a referral is made to a nearby hospital.

The informal caregiver, is being updated by the triage nurse.

LEAVE

The triage nurse leaves the elderly's home. He asks again if there is anything to be done.

He leaves a business card with a hyperlink, so the medical data can be retrieved.

The key is placed back.

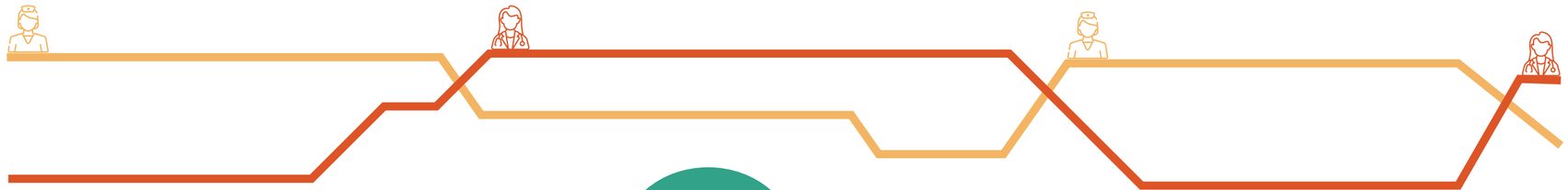
CHECK-UP

A day after, the GP calls back to ask if there are any questions or if there is anything he can do.

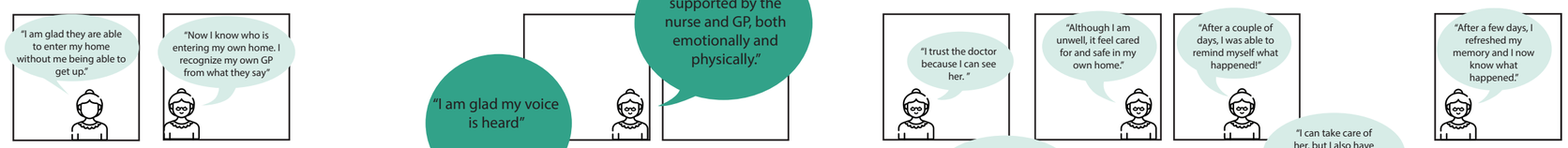
GOAL

ENTER	FAMILIARIZE	TRIAGE AT DISTANCE	ALIGNING	FOLLOW-UP		LEAVE	CHECK-UP
Access elderly person's context	Elderly person is served as a holistic human being: with social, psychological and medical needs	Virtually share and gather information for a sound triage	Informed real-time shared decision by medically empowered person	Match elderly person's possibilities, informal caregivers needs and medical follow up	Fill gaps in memory, explain to relatives and friends what happened	The nurse leaves the elderly person in a relatively good state of mind	The GP asks the elderly if everything went well and if any questions remain

INITIATIVE



BENEFIT FOR ELDERLY PERSON



BENEFIT FOR INFORMAL CAREGIVER

EFFECT FOR NURSE

EFFECT FOR GENERAL PRACTITIONER