

A rapid review of machine learning approaches for telemedicine in the scope of COVID-19

The COVID-19 pandemic forced widespread conversion of in-person to virtual care delivery through telemedicine. This article review machine learning-based telemedicine applications to mitigate COVID-19. Authors developed an updated taxonomy and identified challenges, open questions, and current data types, to improve telemedicine in response to the COVID-19 pandemic. The evidence identified by this review suggests that machine learning, in combination with telemedicine, can provide a strategy to control outbreaks by providing smart triage of patients and remote monitoring.

*Schünke LC, et al. *Artificial intelligence in medicine*. 2022; 129:102312.

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Selecting Performance Indicators and Targets in Health Care: An International Scoping Review and Standardized Process Framework

The purpose of this study is to synthesize international approaches to indicator selection and develop a standardized process framework. Authors developed the 5-P indicator selection process framework to mitigate process risks and support high-quality indicator selection processes. The 5-P indicator selection process framework consists of five domains and 17 elements.

*Heenan MA, et al. *Risk management and healthcare policy*. 2022; 15:747-764.

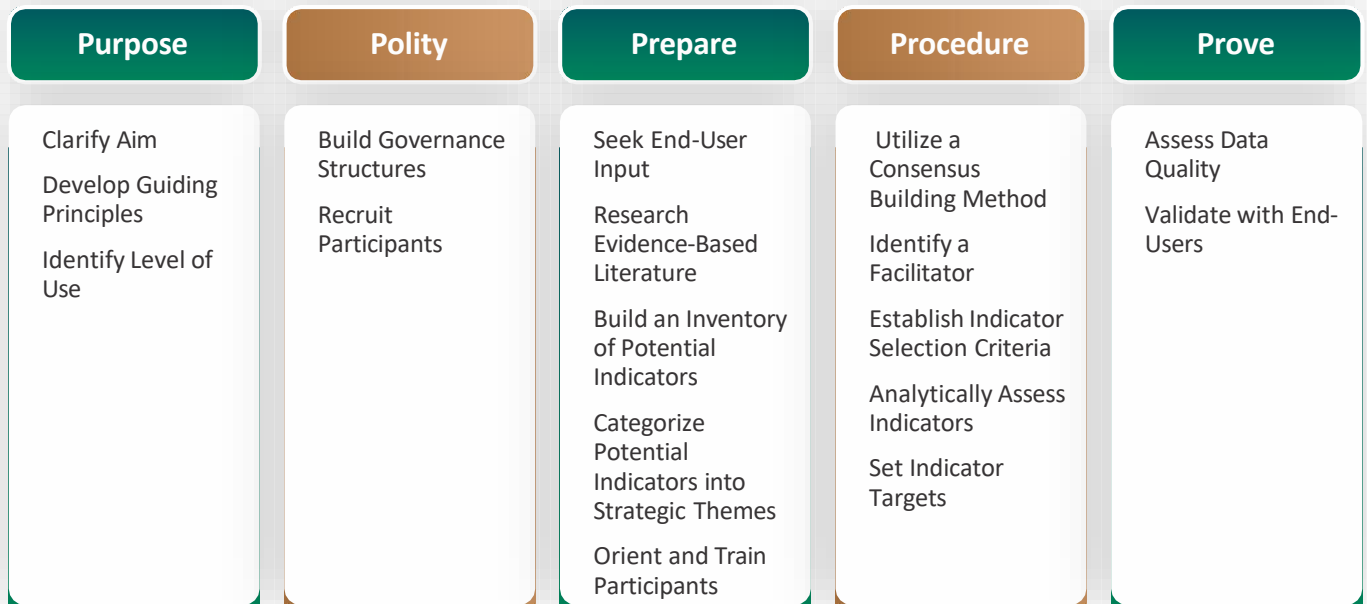
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DOMAINS

ELEMENTS



The 5-P Indicator Selection Process Framework

Optimising GPs' communication of advice to facilitate patients' self-care and prompt follow-up when the diagnosis is uncertain: a realist review of 'safety-netting' in primary care

Safety-netting has become best practice when dealing with diagnostic uncertainty in primary care. Its use, however, is highly varied and a lack of evidence-based guidance on its communication could be harming its effectiveness and putting patient safety at risk. Effective safety-netting (SN) advice should be tailored to the patient and provide practical information for self-care and re-consultation. Authors presented 15 recommendations to enhance communication of safety-netting advice and map these onto established consultation models.

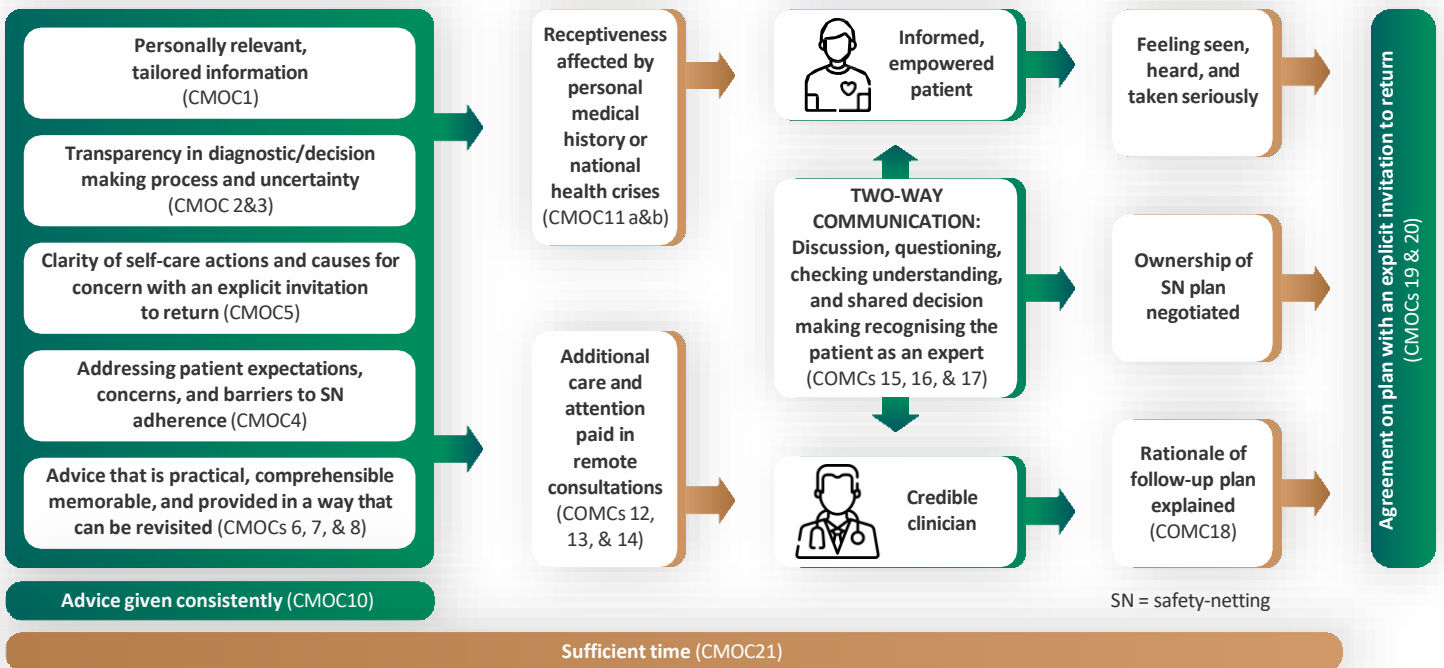
**Friedemann Smith C, et al. BMJ quality & safety. 2022; 31(7): 541-554.*

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DURING CONSULTATION



AFTER CONSULTATION

