The Virtual Check-In tool

	Information
Preparation	Virtual visit etiquette: Consider the space that the patient will view during a virtual visit. Consider sign-posting your actions to the patient if you are not looking at them. E.g. typing up notes on the EMR.
	Sending documents: If working away from the clinic office, consider how to transfer documents E.g. prescriptions, lab and imaging requisitions. Could an MOA send this from the clinic? Consider testing the EMR from home to see what is possible. Does the patient need access to a printer?
	Follow-up visit: Consider the workflow for arranging a follow-up visit for the patient. What are the instructions for the patient?
	If patient does not answer, note the time, date, phone number, and message provided if one was left on the progress note
Introduction	Introduce yourself and the nature of the encounter. Confirm the patient's identity. Acknowledge the unique situation by thanking the patient for speaking with you virtually. Set time expectation for the encounter.
Consent to virtual interaction	Ensure patient understands and verbally consents to the virtual interaction. Use scripted consent statement if using non-secured technology as suggested by the College of Physicians and Surgeons of Alberta (7).
Basic needs assessment	Are the patient's basic needs for housing, food, companionship, etc. currently being met?
Medications	Does patient have adequate supply of current medications based on what pharmacies are able to dispense at one time? Are there any concerns with any medications (e.g.: side effects, compliance, not working, etc.)
Medical concerns	Does patient have any new medical concerns that they need their physician to be aware of that they would like to have addressed or reviewed?
Wellness and mental health	Inquiry into how the patient is feeling. Encourage and support general wellness measures such as exercise, healthy eating, maintaining structured routine, hobbies/interest and virtual social engagement
Other Conclusion and follow-up	Other important issues that emerge during the encounter. Remind patient that information will be communicated to the preceptor, and a follow-up encounter may occur. Provide the patient with the opportunity to state that they would definitely like to speak with the family physician.