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TELEMEDICINE: THE LESSON FROM PANDEMIC EMERGENCY

The discussions that have taken place over the past few months on the value of health systems have solicited operators to reflect on the possibility of rethinking some processes or subprocesses of health system adopting new technological support.

Once the fear of Coronavirus has been overcome, the lesson will remain that ICT technologies, widely used for agile work during emergency, have great advantages and can be increasingly adopted.

As from Michael Grossbard, chief of hematology at New York University's Langone Hospital, "Our practice of medicine has changed more in 1 week than in my previous 28 years combined."

However it is still necessary to overcome cultural, technological, organizational and legal limits that have so far limited the adoption of diagnostic and therapeutic paths based on telemedicine.

Even the scientific evidence of literature in telemedicine puts in evidence that there are well-structured projects even kept alive thanks to local pilot actions and to the will and enthusiasm of the individual operators, be they health care, engineers and / or managers.

The added value of telemedicine has been fully exploited during last month. The question now is: will we return to pre-Covid19 normality or will we have to foresight a new normality learning a lesson from emergency?

A review of some telemedicine services will be introduced, their adoption in emergency and their possibility to remain current clinical pathways.