APPLICATION OF TELE-EVIDENCE IN MEDICAL PRACTICE

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Abstract

During their practice doctors are required to provide testimony regarding that particular medico-legal trauma patient in the court. For giving testimony the doctor has to attend the court physically, which may not be possible always due to various factors, leading to delay in proceedings. Most of the time the doctor attending the court has to take on duty leave, travel distance for attending the court proceedings which causes poor health delivery to the patients dependant on him and increased expenditure of time and money. As tele-medicine is in the state of active development in India, it can be further extended by the concept of “Tele-Evidence” which makes the process of giving testimony in a more simple and practical way. In this article we are sharing our idea with a case report.

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INTRODUCTION

Total number of documented IPC crimes against body is 857995 for the year of 2015 that, accounts for 29% of total IPC crimes with crime rate of 68.1(68.1 cases per 1 lakh population).1 Litigations against the doctors are also in the rise.2 Almost all practising doctors will encounter the situation of giving testimony in the court, especially who are all working emergency/trauma care department. Most of the time they have to travel from the working place to other place (increase in travel expenses and wastage of valuable time) with on duty leave to give testimony which will affect the healthcare delivery in our country where doctor population ratio is 1:1800 against the WHO recommendation of 1:1000.3,4 Our public health system already has a shortage of medical and paramedical personnel. Particularly the specialist doctors are in very short supply in the public sector.5 Considering these facts, it would be better if we have a system that should not affect the health delivery, in the mean time it should not produce any obstacles for court proceedings. Tele-evidence comes here for the rescue. Here we are sharing our experience of application of telemedicine principles for giving testimony in the court.

CASE DETAILS

The study was conducted in the Telemedicine Department, Jawaharlal Institute of Post Graduate Medical Education and Research (JIPMER), Puducherry in February 2017. The doctor working in a super specialty department received summon for attending the court and give testimony in a town in a northern state of India which is more than 2500 kilometres apart from Puducherry. The difficulty in attending the court in person was explained to the concerned Honourable Judge and the Law officers and permission regarding giving testimony through real time video-conferencing was obtained through proper channel. The doctor attended the trial through video-conferencing in the Telemedicine Room JIPMER (Figure-1). The trial was conducted for 45 minutes, at the end of the trial the Honourable Judge, Law officers and the doctor found satisfactory with the mode of testimony. The Telemedicine officer was present throughout the trial for co-ordination.

Figure 1: Doctor giving online Evidence from JIPMER through Video Conferencing
METHODOLOGY:

Before the trial, technical teams from both sides co-ordinated each other and shared their dedicated IP addresses for the secured connection. Software based video conferencing system using laptop was used to connect each other. JIPMER is having Vidyo Web based Video Conferencing software which was given by National Informatics Centre (NIC) free of cost to National Knowledge Centre (NKN) connected Government Institutes / Medical Colleges under NMCN Project of MoH&FW, Government of India, New Delhi.

Hardware and Software Requirements:

- A Laptop with Wi-Fi connected to the internet (1 Mbps) minimum bandwidth and installed Vidyo Web based Video Conference software.
- External mike and speaker for good audio clarity
- Internet (1 Mbps) minimum
- Vidyo Software (Web based Video conference software)
- Wi-Fi Router

DISCUSSION:

In health care contexts, video conferencing is often interchangeable with other terms depending on the application (Telemedicine Clinic, Tele-Barrier Nursing, Tele-Emergency, Tele-Evidence, etc). The concept of Tele-Evidence is, any Doctor can attend the medico legal trial in any court through online video conferencing without visiting the court in person, which is being widely practised in the western countries successfully. The apparent benefits of video conferencing for giving testimony in court would be reduced travelling time, reduced wait time, reduced cost involved with travelling and particularly the doctor can continue the routine patient care services without taking on duty leave. Though the Tele-Evidence is having much benefits, there are certain limitations like maintenance of confidentiality, equipment failure and maintenance problems may cause concern. The establishment of guidelines describing legal and ethical standards of tele-health may alleviate concerns regarding privacy and the possibility of technology transmission failure.

This facility in JIPMER has been created as per the guidelines and norms of Ministry of Health and Family Welfare, Govt. of India. JIPMER Puducherry is fully equipped with state of art Telemedicine equipment and technology including Indian Space Research Organization (ISRO) Satellite and Fiber Optic Connectivity provided by National Knowledge Network (NKN), National...
Informatics Centre (NIC), Ministry of Information Technology and Department of Electronics and Information Technology (Deity), Government of India.

In 2013, Ministry of Health & Family Welfare (MoH&FW), Government of India declared JIPMER as Regional Resource Centre (RRC) for Telemedicine for more than 160 Medical Colleges of South India states including Andhra Pradesh, Karnataka, Kerala, Tamilnadu, Telangana and Pondicherry.

CONCLUSION

Tele-Evidence is a practical and cost-effective modality for the doctors to deliver the testimony of legal and health related, to the court.

Conflict of Interest Statement-
There is no conflict of interest.

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