

Effects of Nurse Led Education Programme on Knowledge Regarding Telemedicine among Health Care Workers - A Review Literature

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Abstract

Background: In a developing country such as India, most of the 620 million rural Indians lack access to basic health care facilities. Additionally, according to research from the Indian Institute of Public Opinion, 89% of rural Indian patients must travel more than 8 kilometres to receive basic medical care, and the remaining patients must travel even farther. Nearly 75% of the population of India lives in rural areas. **Aims:** The study's objectives were to assess the level of knowledge regarding telemedicine among health care workers, evaluate effects of nurse led education programme on knowledge regarding telemedicine among health care. **Methods:** An evaluation method and a quasi-experimental one group pre-test post-test research design were used to perform the study. A non-probability convenient sampling technique was used to select 108 healthcare workers for the sample. Self-structured knowledge questionnaires were distributed to gauge the level of telemedicine knowledge before and after the introduction of the nurse-led educational programme. To analyse the collected data, descriptive and inferential statistics were health care workers. **Result:** The pre-test and post-test knowledge scores differed significantly, as shown by the paired t-test value of 37.50. Therefore, a nurse-led educational programme may be a helpful way to improve healthcare workers' understanding of telemedicine, according to statistical inference. **Conclusion:** The introduction of Nurse Led Educational Program, according to the study's results, significantly improved topic knowledge.

Keywords: Effects; knowledge; nurse led education programme; telemedicine; health care workers

Introduction

Telemedicine in India has the potential to improve all Indians' access to high-quality healthcare. There is only one doctor for every 1,445 Indians, which results in a poor doctor to patient ratio in India. Due to the preference of many doctors to work in urban regions, this inequality is much more prominent in rural areas. A survey by the WHO found that 40.8% of all health workers were in rural areas, where 72.2% of the population lives, while 59.2% of all health workers were placed in urban areas, where 27.8% of the population lives. Through the use of telemedicine, doctors in metropolitan regions can confer with patients in rural areas and, if necessary, offer specialist care, therefore reducing these disparities [1].

The distribution of healthcare is very unequal in emerging nations like India. More than 75% of Indian doctors are located in cities, despite the fact that almost 75% of Indians reside in rural communities. The majority of India's 620 million rural residents do not have access to basic medical facilities. The Indian government only dedicates 0.9% of its yearly GNP to health, and only a small portion of this money reaches outlying rural areas. Doctors who feel they become professionally isolated and out of date if stationed in remote locations argue that the poor infrastructure of rural health institutions makes it impossible to retain them in villages [2].

Material and Method

A quasi-experimental pre-test-post-test research design and a quantitative research approach were used in this study to evaluate the impact of nurse-led education programmes on healthcare professionals' comprehension of telemedicine. In this study, 108 people were the sample size. A preference sampling method with a nonprobability convenience sampling strategy was used to choose the sample. The nurse-led telemedicine education course was the independent variable, and the expertise of healthcare professionals was the dependent variable. The participants in this study were the medical staff at Parul Sevashram Hospital in Vadodara's Waghodia Taluka. All healthcare professionals, including nurses, doctors, and paramedics, met the study's sample criteria, whereas those who had previously undergone telemedicine training were the only ones who were excluded. In this study, a technique called the self-structured Telemedicine Knowledge Questionnaire was employed.

PubMed, Research gate, Google scholar, SodhGanga, database were used to search the literature, Studies were included only if the data on nurse led education programme on telemedicine.

Result

It demonstrates that before receiving a nurse-led education programme, 78.2% of healthcare professionals had average knowledge about telemedicine, while 8.4% had good knowledge. Of them, 22.4% had low knowledge. Following a nurse-led education programme, it was found that 80 percent of healthcare professionals had good knowledge of telemedicine, compared to 28 percent of healthcare professionals who had average knowledge. The pre-test and post-test knowledge scores differed significantly, as shown by the paired t-test value of 37.50. Therefore, a nurse-led educational programme may be a helpful way to improve healthcare workers' understanding of telemedicine, according to statistical inference.

Objectives

The purpose of this study's systematic review of the literature was to:

1. Make the reviews of the literature readily available.
2. It is relevant to the topic of the study and will be useful for my future research.

The purpose of this study's was to:

1. Assess the level of knowledge regarding telemedicine among health care workers.
2. Evaluate effects of nurse led education programme on knowledge regarding telemedicine among health care.

Inclusion Criteria

- Reviews published after 2016 have been chosen for review.
- Studies chosen from Medline, CINHAI, and PubMed.
- Comprehensive telemedicine article.

Exclusion Criteria

- The brief article has been taken down.
- Duplicate content has been eliminated.

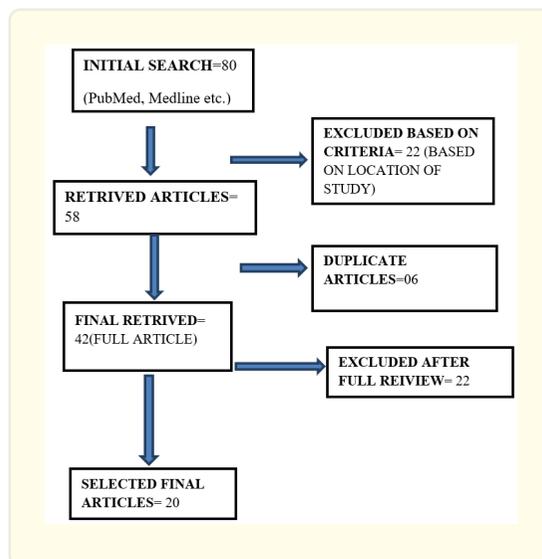
Data and Sources of Data

Literature search

A literature review search was carried out in the following electronic bibliographic databanks: MEDLINE /PubMed and the Google SCHOLAR, including all publications up to September 2021.

Figure: 1 Flow Chart

Study selection process



Study no	Author detail with year of publication	Region of study	Study design	Study sample	Period	Gender	Major findings
1.	Dr. Mrs. M. S. Vinsi, Mrs. Vipina Saji and et al [2016]	Bombay Hospital Indore	A pre experimental study	40 staff nurse	Received on 15 November 2015 Final accepted-22 December Published online January 2016	40 staff nurses.	According to the paired test value at 17.3 (HS), $t(39)=2.04$ $p<0.05$, there was a significant difference between the pre-test and post-test knowledge scores, and there was a significant correlation between the nursing staff members' telehealth knowledge and their chosen demographic variables (professional qualification, working experience, working area, and experience of computer technology in clinical area) [3].
2.	Baby Swangiailun [2017]	community health Centre, M.P	A pre experimental study	50 ANMs.	July 2017	50 ANMs	A paired t-test with a value of 16.6 indicated that there was a significant difference between the pre-test and post-test knowledge scores after the obtained data had been examined using descriptive and inferential statistics. Therefore, it is statistically inferred that a Nurse Led Educational Package may be a useful method for enhancing ANMs' knowledge of telemedicine [4].
3.	Beate-Christin Hope Kolltveit, Eva Gjengedal et al [2017]	Western Norway	qualitative research	Ten focus groups	January 2014 and June 2015	Males and females	Results showed The use of user-friendly technology and training, having a telemedicine champion in the workplace, having the support of committed and responsible leaders, and having effective communication channels at the organizational level were identified as the four key conditions for success in using telemedicine as a new technology in diabetes foot care [5].

4	Bernardo-Valdivieso, Anibal García-Sempere et al [2018]	Valencia (Spain)	a prospective study	472 ELDER	June 2012 and May 2013	472 elderly high-risk patients with plurimorbidity	The Euroqol (EQ-5D) instrument, cognitive impairment, functional status, mortality, and healthcare resource utilization were the primary outcome measures. We used propensity scores for adjusted analyses to account for baseline group imbalances due to insufficient randomization, and the results showed that the telehealth group's EQ-5D score had always been significantly higher than usual care's (diff: 0.19, 0.08-0.30), but not different from telephone support's (diff: 0.04, 0.05 to 0.14). According to adjusted analyses, participation in the telehealth group was linked to an increase of 0.18 points in the EQ-5D score at 12 months compared to usual care (p 0.001), and participation in the telephone support group was linked to an increase of 0.13 points (p 0.001). Except for a marginally significant increase in General Practitioner visits, no differences in mortality or use were discovered [6].
5.	Kirubel Birukand, Eden Abetu [2018]	North West Ethiopia	A Cross-Sectional Study	312 health professionals	November 13 to December 10	312 health professional	Using SPSS version 20, data input and analysis were completed. The characteristics of the respondents were computed using the mean, percentage, and standard deviation. The statistical significance in chi-square of the variations in participant replies. From November 13 to December 10, a total of 312 study volunteers were contacted and included in the study. The response rate was 95.5%, and a value of 0.05 was judged significant. Male respondents made up the majority of the sample (195, 65.4%), and respondents between the ages of 21 and 29 made up the majority of the sample (66.1%). The majority of responders (224, or 75%) had bachelor's degrees. Only 37.6% of the respondents—of whom 74.1% were men, 65.2% were in the 20–29 age range, and 63.4% had more than five years of work experience—had shown that they had a strong understanding of telemedicine. A suitable test to assess the respondents' attitudes regarding telemedicine was utilized with 191 (64.0%) [7].
6.	Karen , Dorthe Boe Danbjørg and et al [2019]	Odense University Hospital, Denmark.	An explorative qualitative study	Eight participants		physician, a physiotherapist and a nurse	Results The study included eight participants (n = 8), five community nurses, and three members of the specialized palliative care team—a head physician, a physiotherapist, and a nurse. The knowledge of the medical specialists was founded on n = 82 video sessions with 11 patients. 3 to 18 video consultations per patient were conducted. Direct palliative care was made easier by the use of tablets for video consultations, which also encouraged collaboration between the community nurses and the nurse on the specialized palliative care team. Discussions concerning personal and intimate concerns relating to the condition when family members are present could be a deterrent to using video consultations [8].

7.	Sarina Yaghobian, Robin Ohanessian and et al[2020]	French	National survey	3,312 Medical students	15 December 2018 to 3 March 2019	Male Female	The poll was completed by 3,312 medical students and residents in total, according to the report. The most well-known telemedicine procedure (86.9%) was synchronous video consultation; the least well-known procedure (40.3%) was asynchronous tele-expertise. The majority of respondents (84.8%) said they were unaware of the rules governing telemedicine. 82.8% of students and residents agreed that telemedicine was important for enhancing access to care; 14% of respondents said they had previously performed telemedicine while studying; 14.5% said they had received telemedicine ET; nevertheless, 97.9% said they lacked the necessary training [9].
8.	Qian Wu, Jennifer Kue et al [2020]	China	quazi experimental study	60 (30 in the intervention group, 30 in the control group)	June 2015 and August 2015	Male Female	There were 60 BC patients enrolled, 30 in the intervention group and 30 in the control group. The intervention group's participants engaged in a nurse-led We Chat-based support programme (WSP), whereas the control group's participants received a telephone follow-up. Both groups of subjects underwent evaluations following discharge as well as at 1, 3, and 6 months later. Social support, psychological health, and physical well-being were assessed and the outcome was At the beginning, there were no differences between the intervention and control patients. After 6 months, the intervention group had considerably improved physical well-being (p 0.001), anxiety (p 0.001), depression (p 0.001), and support from outside the family (p = 0.037) than the control group. The intervention group demonstrated that there were substantial differences in physical well-being (p = 0.036), anxiety (p 0.001), and depression (p 0.001) from baseline to six months of follow-up [10].
9.	K M Augestad, A M Sneve, R-O Lindsetmo [2020]	university hospital and five district medical centers	a randomized clinical trial	110	more than 12 months	Males and females	The results showed that 64 patients (hospital 38, TC 26) were followed for more than 12 months, and 246 consultations (hospital 151, TC 95) were held. A total of 110 patients were randomly assigned to follow-up at a hospital (58 patients) or a TC (52) facility. The EQ-5DTM index score (P = 0•301), EQ-5DTM visual analogue scale (VAS) score (P = 0•775), work/social function (P = 0•822), sexuality/body image (P = 0•253), and stoma function (P = 0•074) did not vary in terms of quality of life. In terms of care coordination, hospital follow-up performed better (staff collaboration, P = 0•004 ;).met same people, P = 0•003) and communication (surgeon understandable, P 0•001; surgeon compassionate, P = 0•003). The number of hospital consultations did not increase and the frequency of trips lasting longer than eight hours decreased as a result of TC (P = 0•684 and 0•007, respectively) [11].

10.	Prateek Malhotra, Disha Soni [2020]	India	cross-sectional survey	428	May 10, 2020 to June 30, 2020	Male Female	Statistical Package for the Social Sciences (SPSS) version 25 was used for data analysis, and the study's findings were 40% of the participants in the study overall were men, and 60% were women. 52.1% of the general population reported having insufficient awareness regarding telemedicine, and 43.3% said the same about its use. However, 90.9% of respondents thought telemedicine was a good strategy and were prepared to employ it and incorporate it into their practice in the future. It was shown that people's attitudes toward telemedicine had an impact on how eager they were to utilize it in their careers [12].
11	Seyeb Kazem, Mohsen Kamali et al[2020]	Valiasr Hospital in Zanjan	quazi experimental	60	Jan-Dec 2020	Male Female	Finally, the collected data were analysed using SPSS software version 25 utilising descriptive statistics (mean and standard deviation) and inferential statistics (Chi-square, Independent t-test, and Paired t-test). The outcomes were After the intervention, the T-pair test results showed a statistically significant difference between the control and test groups' overall quality of life scores and its dimensions, resulting in a greater ratio of quality of life in the test group (P 0.05). Regarding demographic traits and scores in various facets of quality of life prior to the intervention, there was no statistically significant difference between the two groups (P > 0.05) [13].
12	Maria Alejandra Hincapie, Juan Carlos Gallego and et al[2020]	United States of America (USA),	cross sectional study	45	Jan-Dec 2020	Males and Females	As a result, 45 studies that met the criteria for inclusion were included. The majority (38%) of the studies were carried out in the USA, followed by 15.5% in India and 15.5% in China. Cross-sectional research using historical records accounted for the majority of studies (73%). With the exception of one study published in Spanish, all publications were authored in English. Most publications evaluated the use of telemedicine for outpatient treatment, then for in-hospital care, and came to the following conclusion: The COVID-19 pandemic has encouraged the use of telemedicine, a resource that has changed how medical services are delivered. To overcome challenges with patient care during the pandemic, a variety of implementation strategies are helpful. Its advantages vary depending on the type of medical practice. These advantages should encourage health systems to work for a successful and thorough deployment of telemedicine in diverse domains, together with the advice and documented experiences [14].

13.	Mohamed L. Elsaie, Hany A. Shehata and et al[2020]	Egypt	cross sectional study		July -aug-2020	238 heard about SCOT, of whom 124 were males.	As a result, (Mean 4.17 1.63; p.05) Dermatologists had high awareness of telemedicine. 193 respondents (68.9%) and 164 respondents (58.6%) to the survey were familiar with the terms “telemedicine” and “teleconferencing,” respectively. Although the majority of responding dermatologists 234 (83.6%) supported employing telemedicine protocols on a trial basis at first before full deployment, 227 (81.1%) were sure that the COVID 19 pandemic provides a good time to start applying them [15].
14.	Ahmed I.Albarraka, Rafiuddin-Mohammedb and et al [2021] OCTOMBER 2021	Riyadh region, Saudi Arabia	cross sectional	391	Jan 2021	Male Female	As a result of the investigation, There were 391 doctors in all, of which 301 (or 77.0%) men and 90 (or 23.0% women) completed the survey. One-half of the participants never used a laptop or personal computer at home. It’s interesting to note that 89.2% of them own two or more smart devices. Participants knew about telemedicine technology on average (46.1%). Nearly 77% of the experts said that using telemedicine required ongoing training (P = 0.01). The majority of people (90%) thought that using telemedicine to provide patients with medical care was a practical strategy. More than 90% of professionals in various disciplines concur that telemedicine can save time and money, and they also thought that information and communication technology (ICT) could play a part in the healthcare industry. In general, 70% of doctors said there weren’t many conferences, speeches, or meetings at their workplaces about telemedicine technology. Patient privacy, the exorbitant expense of equipment, a lack of appropriate training, and a lack of collaboration between information technology experts and clinicians are the main concerns with adopting telemedicine, according to reports [16].
15.	RakeshDatta, AnubhavS-ingh et al [2021]	India	survey	602 active health-care workers	28	602 active health-care workers	The study’s findings showed that 602 currently employed healthcare professionals took part. The majority of participants scored highly for awareness, knowledge, and attitude toward telemedicine, while just 39.53% did so for telemedicine-related abilities. Few respondents had seen or read the telemedicine practice standards, and the majority were unaware of their existence. The majority of respondents were eager to take a course or receive training to improve their knowledge of and use of telemedicine [17].

16.	Hadeel Abdullah Alajwari, Asma Alfayez, [2021]	Saudi Arabian	a cross-sectional survey	330	Dec 2021 nov 2022	406 Medical Students and 343 Nursing students	According to the study's findings, women made up the majority of respondents (73.9%). They were >35 years old (54.8%), held graduate or postgraduate degrees (65.5%), and were more than half of the population. Saudi Arabians made up 96.7% of the responses in total. The majority of participants (70.0%) were familiar with the phrase "telemedicine" and believed that it may lower transportation expenses (92.1%). Among the respondents, 67.0% said they had never used telemedicine services, and 58.8% said they had never seen a telemedicine system before. Telemedicine was a helpful tool during the COVID-19 pandemic, according to 87.3% of people overall who agreed or strongly agreed. Additionally, telemedicine promotes patient diagnosis (58.8%), improves communication (58.2%), decreases clinic visits (85.9%), and completes duties quickly (70.3%), according to more than half of participants. Additionally, telemedicine impact on patient privacy was refuted or severely refuted by 51.5% of respondents [18].
17.	Sami Ullah, Amal Mohammed Maghazil and et al [2021]	Saudi Arabia	a cross sectional study	46%	May 2020 to may 2021	100 young adults	As a result of the investigation, In total, 46% of the participants knew about but did not use telerehabilitation service technology. The best service delivery strategies, according to 69.51% of respondents, were telerehabilitation and community-based rehabilitation. About 43% of participants said that their restricted use of telerehabilitation devices was mostly due to their lack of information about information technology and the associated costs. The majority of participants (52.44%) believed that telerehabilitation services carried a risk of confidentiality breach [19].
18.	Galland J and et al [2021]	French	descriptive observational study	309	July and October 2019,	Males and females	A study An examination of 309 replies from internal medicine specialists (61, or 8%) and internal medicine residents (38%) revealed that 34.6% of respondents had some awareness or understanding of telemedicine regulation. It could enhance patient care, access to care, and interactions between internists and other doctors for 62, 1%, 72.5%, and 74.1%, respectively. The absence of face-to-face contact with the patient (57.3%) and computer issues (55%), which were the biggest barriers to this approach. Only 23.3% of people did so, 88.9% of whom used teleexpertise. In 70.8% of the cases, informal telemedicine was used (through phone and email). Doctors over 50 had a better understanding of the rules and used official telemedicine more frequently. In total, 54 percent desired to practice telemedicine, and 72.8 percent desired to learn it [20].

19.	Luz America Paczka-Giorgi, Gerardo Velasco Gutiérrez and et al [2021]	Western Mexico	cross-sectional survey	148	JUNE 2021	Male and female	As a result, The survey was completed by 148 patients in total (78 female and 70 male), with a mean age of 43.215.5 years. 74.3% of participants had completed high school, and 78.4% had utilized the Internet for a variety of purposes, including some health-related issues. Regarding telemedicine, the respondents' level of knowledge was determined to be poor (36.5%) and moderate (47.5%). Self-care in terms of health is important to the majority of responders (84.4%), particularly eye health care (91.9%). In terms of attitudes regarding telemedicine and telehealth initiatives, 62% of respondents had high attitudes, 21% have moderate attitudes, and 17% have low attitudes [21].
20.	Laima Alam, Mafaza AlamLaima Alam, Mafaza Alam [2021]	Pakistan.	across-sectional survey	240	10th October to 9th November 2020	Males and female	SPSS 19.0 was used to analyses the data. With a response rate of 63%, 240 responses were received. The majority of participants (62.8%) were female, and most of them worked at teaching (35.1%) or tertiary care (34.6%) hospitals in urban (88.5%) or semi-urban (9%) locales. More than half of the doctors said that infrastructure and specialized hardware were not readily available, and 73% of the doctors had not had formal training. Many of the participants expressed concern about the lack of regulatory authorities, assessments, and accreditations of the service providers, the dangers of malpractice, missed diagnoses, prescription errors, and medico-legal concerns. The hospital configuration, location, and participant's specialty were all statistically connected to the availability of a certain infrastructure. Infrastructure and a lack of technological awareness were seen as the two biggest barriers preventing the public from embracing telemedicine [22].

Result and Discussion

It demonstrates that before receiving a nurse-led education programme, 78.2% of healthcare professionals had average knowledge about telemedicine, while 8.4% had good knowledge. Of them, 22.4% had low knowledge. Following a nurse-led education programme, it was found that 80 percent of healthcare professionals had good knowledge of telemedicine, compared to 28 percent of healthcare professionals who had average knowledge. The pre-test and post-test knowledge scores differed significantly, as shown by the paired t-test value of 37.50. Therefore, a nurse-led educational programme may be a helpful way to improve healthcare workers' understanding of telemedicine, according to statistical inference. The discussion is compared the similar study of Archana Gunjal and Preeti Manoj Bagul [2022] An analogous study was conducted on the effects of carefully designed educational initiatives on nursing students' understanding of telemedicine at a particular Mumbai institution, as well as the effects of planned instruction on knowledge and learning. The intended instruction was successful in raising the sample's overall level of knowledge because the calculated value (16.96) was higher than the table value of 2.05. A significant difference in the subjects' mean pre-test and post-test knowledge scores proved the study's hypothesis correct.

Conclusion

The study found that, prior to the implementation of the nurse-led education programme, the majority of healthcare professionals had an average understanding of telemedicine. This understanding was based on data collected from 108 healthcare workers using a self-structured knowledge questionnaire and a non-probability convenience technique. However, healthcare professionals' awareness of telemedicine improved when the nurse-led education programme was put into place. With regards to telemedicine, sociodemographic parameters like education level, years of experience, income level, and prior information's source were all strongly correlated with pre-interventional knowledge.

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