Post Graduate Diploma in Management (Hospital & Health Management)

PGDM – 2022-24 Batch

2nd Year - 6th Term Examination

Course & Code	: **Telehealth and Mhealth-HIT 717**	**Reg. No.**	:
Term & Batch	: **VI, 2022-24**	**Date**	: **29-01-2024**
Duration	: **3 Hrs.**	**Max. Marks**	: **70**

Instructions:
- Budget your time as per the marks given for each question and write your answer accordingly.
- Don't write anything on the Question Paper except writing your Registration No.
- Mobile Phones are not allowed even for computations.

Part A: Q. 1 to Q.10 (10 questions*2 marks = 20 marks). All are compulsory

Match the following

S. No	Column X	S. No	Column Y
1	Store and Forward Example	A	Less ER referrals
2	Realtime	B	Personalized relationship
3	Predictive Analytics	C	Personalized treatment
4	Customer relationship management	D	Teleradiology
5	Tele Child healthcare	E	The patient interacts directly with the health professional
6	Teleconsulting	F	transfer images at a long distance to facilitate diagnosis
7	Chronic Patient Relationship Management	G	Remote Consulting
8	Tele Geriatric Care	H	Set of methods that includes statistical models and empirical methods
9	Tele Pathology	I	The patient may or may not interact directly with the health professional
10	Telemonitoring	J	Use of wireless to monitor patients

Part B: Q.11 to Q.15 (4 questions *5 Marks = 20 Marks) Attempt any four.

11. What are the main steps of data analytics in Teleheath?

12. Give an example how Telehealth can be used to monitor Parkinson patients

13. Mortif Eye Care is interested in using Telehealth to check for blindness in the community? What should be planning steps it should adopt?

14. How are the standards used in Telehealth?

15. What are the Commonly raised legal and ethical issues if Telehealth interventions should be designed for providing care to transgender population.

Part C: Long Questions (Any two)   (2 x 15 = 30)

16. In the town of Alaska, Phyllis an immigrant from Korea and a permanent resident is living with wife and children in remote town in Alaska. He receives psychiatric care for his depression from a doctor in Korea during a scheduled work break on his over night shift in the plant he works. He is able to receive the care in his own native language at a less expensive rate than Alaska. He pays $10 a month. This is more than he would like to pay but it is not covered by insurance. He is assisted by cognitive behavioural therapy mobile app that monitors his behaviour and app use, tracks symptoms and provides education and coaching. It seems to be helping.

What are the potential benefits and concerns do you perceive in the above case.

17. In 2020, Sanchez family all become symptomatic with COVID -19 pandemic following an exposure to Mr Sanchez at the restaurant where he works. Mr Sanchez is an undocumented immigrant in US. Mrs Sanchez and his mother-in-law have their green cards. Mr Sanchez children are US citizens. The family was asked to do home isolation and given video consultation with Nurse practitioner. The nurse became frustrated when Mr Sanchez was unavailable at the portal despite reminders and messages, and she had to resort to telephone. Finally, through his son who spoke English she understood that they were not aware of patient portal and did not have a primary care physician for their family. Mr Sanchez did not wish to worry his family how serious he was and did not reveal the actual symptoms. Nurse cannot assess him properly as the video, or home blood pressure, pulse oximeter readings were not available. The seriousness was known when he was too tired unable to walk and ambulance had to be called.

What are the potential benefits and concerns do you perceive in the above case.

18. considering the rise in Zoonotic diseases as evidenced by Covid 19 there is an increase in focus on One health that related animal- human and environment interface. How can Telehealth be used for surveillance of One health issues considering both animal and human health in sync.