Exploring the Applications of Telehealth in Musculoskeletal Care

Telehealth is an umbrella term used to represent various digital healthcare facilities, including clinical assessment and physical therapy. Its diverse applications in and potential to improve musculoskeletal care delivery merit closer attention.

An overview of the current state of telehealth as pertains to orthopaedic surgery

<table>
<thead>
<tr>
<th>Teleconsultations</th>
<th>Teleacademics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Virtual clinical examinations</td>
<td>Remote education and virtual medical conferences</td>
</tr>
</tbody>
</table>

Advantages:
- Unnecessary emergency department visits can be avoided
- Provision to receive specialist opinions, regardless of the doctor’s location, available

Limitation:
- Standard physical examination cannot be performed

Advantages:
- Expands national and global audience
- Improves healthcare by sharing information on contemporary research and surgical techniques

Limitation:
- Missed opportunities for interactive Q&A sessions, round-table sessions, and instructional course lectures

<table>
<thead>
<tr>
<th>Telerehabilitation</th>
<th>Telerecovery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Virtual physical therapy</td>
<td>Artificial intelligence-aided monitoring and tracking of patient’s health recovery</td>
</tr>
</tbody>
</table>

Advantages:
- Highly effective in pain reduction
- Provides greater patient convenience

Limitation:
- Missed instructions and increased uncertainty of patients in the absence of rehabilitation specialists

Advantages:
- Simple devices such as wearables are available for comprehensive monitoring of the patient
- Physical postoperative progression and activity levels can be tracked, and reminders can be sent

Limitation:
- Lack of validation of the available technology’s accuracy and performance

Although telehealth is in its infancy, it is a cost-effective and non-inferior method to conventional practices and can bring about a paradigm shift in musculoskeletal care infrastructure.