

Compared with the much more familiar face-to-face consultation, a telemedicine consultation requires high levels of concentration that can be a significant cause of stress for health professionals. One of the keys to adjusting to this new reality is the acquisition of skills in new information and communication technology tools.² To acquire these skills, nurses could benefit from shared learning with other health professionals to identify strengths and address weaknesses. Such an approach would not only ensure that teleconsultations are as effective as required, but would also help to ensure that they are conducted in a friendly, calm, and relaxed atmosphere, thus creating an agreeable experience for patients.

The application of soft skills in the cardiology teleconsultation ensures successful interaction with patients and family members. One of the key areas where physicians can benefit from training is communication skills, especially in relation to informing patients about their health status.³ The cardiologist needs to maintain a motivational and proactive approach, while demonstrating logical thinking and communication skills. These skills are not innate; they must be developed and maintained, and training in all these areas should therefore be a priority. Maintaining good communication is the surest guarantee that the consultation goals will fall within an integrated care approach.⁴

It is thus essential that physicians and nursing professionals internalize the importance of using soft skills during telemedicine consultations. This requires a conscious and constant effort. The goal is to achieve an appropriate response to the new situation that optimizes workflows while avoiding staff burnout, thus ensuring that the consultation is a positive experience for both the patient and the health professional. This is achieved through empathy, assertive communication, sensitivity, and emotional intelligence, with the aim of building a close and trusting relationship.⁵

Soft skills are an essential part of the health professional's toolkit, and their acquisition should therefore be prioritized to support interactions with patients, who are certain to feel vulnerable due to their health problem plus the added stress related to the current pandemic. An empathetic interaction with patients provides an important counterbalance to this difficult situation. To complement this community and human-centered

approach, health care specialists also need to acquire skills in the use of new technologies for teleconsultations in accordance with data protection regulations.

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Soft skills in cardiology telemedicine consultations. Response



Las habilidades blandas en consultas telemáticas de cardiología. Respuesta

To the Editor,

We appreciate the letter by Rosario Pacahuala et al. regarding our consensus document of the Spanish Society of Cardiology on telemedicine consultations.¹

By enabling adaptation to the new situations associated with medical modernization, telemedicine has become established as a form of care of both the here and now and the future. Telemedicine consultations permit a different form of health care that can be a source of stress for both medical staff and patients. Thus, satisfactory telemedicine consultations must be rewarding and reassuring, produce a positive feeling for both

physicians and patients, and avoid generating stress, anxiety, and discomfort.²

Accordingly, the telemedicine consultation must be optimized to maximize performance. Efficient consultations rely on soft skills focused on empathy, warmth, and trust. These skills underlie and enrich hard skills centered on abilities and scientific knowledge. Indeed, the combination of both skill sets is key to high-quality telemedicine. Such consultations must guarantee confidentiality, stressing privacy and data protection, and be efficacious and safe.

As highlighted by the authors, the role of nursing staff is crucial in this context, as well as probably that of pharmacists and other individuals involved in health care, such as caregivers. A consensus document on the telemedicine consultation for nursing staff would be highly valuable, with a special focus on the management and monitoring of lifestyle habits and control of risk factors. As one would expect, all components should be coordinated with primary care. The involvement of other professionals would facilitate the optimization of resources in telemedicine³ to offer health care that is at least as rewarding as

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face-to-face consultations. This coordination work regarding continuity of care could be organized, at least partly, by the Working Group on the Integration of Cardiology and Primary Care of the Clinical Cardiology Association.

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CONFLICTS OF INTEREST

None.

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