Smartphone Smart Apps – Breaking the Communication Barriers

The Editor,

Smartphone usage has become a necessity for the current generation. The past decade has seen a dramatic increase in its usage among the healthcare providers. Various apps present in these smartphones help healthcare professionals in time management, health record maintenance and access, communications, consulting, monitoring, medical education, and training.[1,2] However, as per our literature search, use of smartphone app by an anesthetist for communication with the patient of different language in the perioperative period has not been described until now. Hence, we report a case in which a Google-based app “Speak to voice translator” was used to communicate successfully with a patient from Qatar in the perioperative period.

A 42-year-old patient, citizen of Qatar, was admitted to our hospital for laparoscopic excision of hydatid cyst in the liver. He was accompanied by a translator as he could only speak and understand his native language “Arabic.” Since none of the anesthesia staff was proficient in the patient’s language, preanesthetic evaluation was done by a trained anesthesiologist with the help of an interpreter. The patient was classified into American Society of Anesthesiologists I status and was posted for laparoscopic excision of hydatid cyst in liver under general anesthesia. On the day of the surgery in the preoperative room, we decided to use the Google-based app “Speak to voice translator” for communicating with the patient. The translator was kept as an alternative option to voice translator app in case of failure to communicate with the patient. To download the app, we opened the Play Store and searched with the key words of voice translator. Then we installed the app named “Speak to voice translator.” Although it took a little more time to explain the anesthesia procedure, he could understand the procedure properly using this app. The same app was used inside the operation theater while giving anesthesia and during extubation. A head set with two ear plugs was used to deliver the commands from the Google app. This was done to enhance the voice perception by minimizing the external sound disturbances in the operation theater. The commands of the anesthetist in “English” was translated to “Arabic” by the app and delivered to the patient’s ear with the headphone. To make sure that commands are being delivered to the patient, we used the earphones splitter cord. Two ear phones were attached through this splitter cord. One ear phone was for the patient and the other ear phone was used by the anesthetist. The same voices were heard by both the patient and the anesthetist. The patient was following the commands that were given using the app. He got extubated successfully and then shifted to the recovery room.

In the era of medical tourism, communication between patients and medical staff can be challenging if both parties have different cultural and linguistic backgrounds. A trained medical language translator can potentially alleviate these problems and significantly contribute to an effective, improved care process when foreign language patients are involved. Scarcity of bilingual healthcare professionals and adequately trained translators along with prohibitive interpretation costs hinder full implementation of language service. This experience sheds light on the potential niches for the use of smartphones in anesthesia, a device with which most are already equipped and which is perhaps underutilized in the present patient care aspect. Use of smartphone app for establishing communication with the patient can decrease the treatment cost by avoiding the translator fees. It also eliminates the possibility of misinterpretation of the question asked by the medical professional as there is a direct communication with the patient.[3] However, its use may take more time to communicate with the patient when compared with the translator. To conclude, smartphone can be used as an alternative tool to establish communication with the patient of different language and culture where a translator is not available or in cases where patient wants to cut off the translator fees.

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Informed consent

Written informed consent was obtained from the patient.

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Conflicts of interest

There are no conflicts of interest.

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References

1. Yoo JH. The meaning of information technology (IT) mobile devices to me, the infectious disease physician. Infect Chemother 2013;45:244-51.
2. Ozdalga E, Ozdalga A, Ahuja N. The smartphone in medicine: A review of current and potential use among physicians and students. J Med Internet Res 2012;14:e128.
3. Juckett G, Unger K. Appropriate use of medical interpreters. Am Fam Physician 2014;90:476-80.

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