
**APPLICATION OF MEDICAL TELEPATHY TECHNOLOGIES FOR HEALTHCARE
AND SAFETY MANAGEMENT**

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ABSTRACT

This paper examined the implications of medical telepathy for healthcare policies and management, discuss its impacts on accessibility, quality and safety. Telepathy, in the context of healthcare, refers to the use of telepathy and telehealth technologies to provide healthcare services remotely. It enables patients and healthcare providers to connect and communicate with each other, share information and deliver care without the need for in-person visits. Telepathy encompasses a wide range of applications. Telepathy helps to eliminate distance barriers and can improve access to medical services that would often not be consistently available in distant rural communities. Telepathy, the use of telemedicine and telehealth technologies in healthcare, has emerged as a powerful tool with the potential to transform healthcare delivery and improve patient outcomes. It was therefore recommended that Dedicate resources to improve internet connectivity, provide compatible devices and develop interoperable systems to facilitate the seamless integration of telepathy technologies.

Keywords: Medical Telepathy tools, Telepathy Application, Accessibility, Quality, Safety.

1. INTRODUCTION

The rapid advancement of technology has led to the emergence of telepathy and telehealth solutions, collectively referred to as medical telepathy, transforming the way healthcare is delivered and accessed globally (Adenuga, Iahad & Miskon, 2023). Medical telepathy encompasses various digital health tools and platforms, including remote consultations, virtual cure services, remote monitoring and data analysis. These technologies enable healthcare providers to extend their reach beyond traditional clinical settings, offering more accessible, convenient and cost-effective care.

The term “telepathy” technologies is composed of the two Greek words ‘*tele*’ meaning ‘*far*’, and *medicine* (James, Odimayomi, Kayode & Halilu, 2022). This can be translated to mean the delivery of medical based services to cater for far distance travelling. Telepathy which is a subset of e-health is an integrated system of health-care delivery that employs telecommunications and computer technology as a substitute for face-to-face contact between health service provider and client) (Nakajima & Chida, 2022). This means that telepathy services and healthcare deals with the transfer of electronic medical data (that is, images, sounds, live video and patient records) from one location to another. It includes the use of electronic information and telecommunication technologies to support long-distance clinical health care, patient and professional health-related education, public health, and health administration (Wamala & Kaddu, 2022).

Telepathy may be as simple as two health professionals discussing a case over the telephone, or as complex as using satellite technology and video-conferencing equipment to conduct a real-time consultation between medical specialists in two different countries. It can also involve the use of an unmanned robot (Van, Soyannwo, Odebunmi, Dania, Van Selm, Van, & Hasselaar, 2021). The fact that economic health depends on medical health, since health is wealth, implies that health care needed to be accessible to all including the rural communities which if compromised could undermine the entire socioeconomics fabrics of the country. Today, patients are able to acquire healthcare information through the Internet, resulting in smarter patients with higher expectations and a demand for high-standard quality care. The review of the health-care system, the level of its decline, the services provided, and the general health status of Nigerians, with the available data revealed that the Nigerian health-care system is characterized by poor infrastructure, high infant mortality rates, and poor nutritional status of children. This problem is equally compounded by high fertility rates and high maternal mortality rates (Awolola, 2023).

The healthcare system of Nigeria consists of primary, secondary and tertiary levels of care. These levels are under the three tiers of government namely Federal Ministry of Health (FMOH), State and Local respectively. The local governments provide primary level of services (lowest level of service) through Primary Health Care (PHC) centers. The state governments are responsible for secondary level of healthcare and deliver service through general hospitals. Finally it is the responsibility of the Federal Ministry of Health to deliver tertiary care through highly specialized services in teaching hospitals and federal medical centers (Duru & Nwagbos, 2022). The responsibilities of these three tiers of government in the delivery of health service overlap in a way. State governments provide some tertiary care through state-owned teaching hospitals, tertiary institutions also provide PHC services through their general outpatient department while the Federal Ministry of Health through National PHC Development Agency develops policies, develops PHC physical structures and supervises the operations of PHC centers (Nigeria Demographic and Health Survey, 2020).

With the Nigeria's health care system undergoing profound changes and experiencing relentless financial pressures, there is need to consider telepathy application in urban as well as rural settings. In many countries (Nigeria for example), Telehealth has also recently reemerged as a potentially clinically appropriate, cost effective means of supporting patients and providers in the changing health care system (Ajala, Adetunji, & Akande, 2022). It has been considered as a promising tool that addresses many of the problems of delivering health care to remote areas, as well as to areas underserved by health care professionals (Wamala, & Kaddu, 2022).

The terrible failure of public health care system in Nigeria has attracted comments and criticisms from local and national levels. The provision of adequate medical services to the citizens, particularly those residing at the rural areas has left much to be desired. Today there is rapid increase in population growth so the problem of managing health effectively becomes very difficult and in spite of the current health sector reforms by the government, the public health care system in Nigeria is still inefficient in all ramifications. Adenuga, Iahad, & Miskon (2017) argued that the problems facing the public health care system in Nigeria could be traced to poor implementation of National Health Policy as well as other health-related policies and programmes. When caring for people, the focus must always be on ensuring the patient receives the best quality care at all times. Using telepathy technologies can ensure that more people receive top quality care, faster and more efficiently from top medical specialists, no matter where

they live. The fundamental problem of healthcare delivery in Nigeria includes poor funding and access to good health services by the needy in the rural areas and the poor urban city dwellers. This paper examined the application of medical telepathy for healthcare and health safety management and also discussed its impacts on accessibility, quality and health safety. The specific objectives of the paper are to:

- a) examine the medical telepathy and its applications in the healthcare settings
- b) examine the impact of medical telepathy on Healthcare Policies and Management
- c) discuss the implications of medical telepathy on quality and Safety of Care

To achieve this, the rest of this paper was discussed under specific sub-headings. Following this introduction is the section of the research methods which described the approach of the review. After the research methods, there are issues on the specific objective were reviewed. Lastly, conclusion was discussed while the recommendations were highlighted.

2. RESEARCH METHODS

The design of the study or research design is the spec-analysis of the data and procedure needed to attain a research fit. It is the arrangement of conditions and analysis of data in a manner that is aimed at combining relevance to achieve a research purpose (Saunders, Lewis & Thornhill, 2003). Consequently, research designs are typically classified according to the nature of the research objectives or type of research. For this paper, the qualitative - expository research design was adopted for this study. The qualitative-expository research design is aimed at widening or awakening prospective readers to the values of a discovery by reviewing or discussing its inherent benefits. This was chosen because the research sought to awaken prospective readers or information users to telepathy usage and its impact.

Data collected for this paper were majorly from secondary sources. The secondary data collected for the review of previous literature and theoretical support were from textbooks, electronic journals, newspapers, and other internet sources. Hence, the researcher was simply trying to make generalizations based on content review from previous literature to draw inferences from reviews and make generalizations. The technique of analysis was basically the descriptive-expository approach. Since the data collected are solely qualitative in nature, the content analysis method was used to glean out facts from articles, textbooks, newspapers, relevant websites and electronic journals linked to Research Gate, Scopus, Academia.edu and other significant internet sources. Inferences were drawn on the basis of the researcher's views in relation to the position of scholars from previous literature.

Medical Telepathy tools and its range of applications

Telepathy, in the context of healthcare, refers to the use of telepathy and telehealth technologies to provide healthcare services remotely. It enables patients and healthcare providers to connect and communicate with each other, share information and deliver care without the need for in-person visits. Telepathy encompasses a wide range of applications, including

1. **Remote consultations:** Video or audio consultations between patients and healthcare providers facilitating diagnosis, treatment and follow-up care
2. **Remote patient monitoring:** The use of wearable devices, sensors, and mobile applications to collect and transmit patient health data for real-time monitoring and proactive intervention

3. **Store-and-forward telepathy:** Sharing of patient health information (e.g. medical images, laboratory results) between healthcare providers for remote evaluation and consultation
4. **Tele-Education:** Online educational resources and training programme for healthcare professionals and patients, promoting knowledge exchange and continuous learning.
5. **Virtual care services:** Remote delivery of therapeutic interventions, such as remote physical therapy, speech therapy or mental health counseling

There are various types of telepathy applications in healthcare, each serving specific purposes and catering to different healthcare needs (Idoga, Toycan, Nadiri & Çelebi, 2019). Some of the most common types include:

Real-Time (synchronous) Telepathy: This type of telepathy involves live, two-way communication between patient and healthcare providers. Examples include video consultations, virtual visits and remote patient monitoring.

Store-and-forward Telepathy: In this type, patient health information (such as medical images, laboratory results or recorded video/audio) is captured and transmitted to healthcare providers for later review and assessment.

Remote Patient Monitoring (RPM): RPM uses wearable devices, sensors, and mobile applications to collect and transmit patient health data, such as vital signs and symptoms for real-time monitoring and proactive intervention.

Tele-education: This type of telepathy involves the use of online educational resources and training programmes for healthcare professionals and patients, promoting knowledge exchange and continuous learning.

Tele-mental health: Tele-mental health focuses on providing remote mental health services, including psychiatric consultations, psychological counselling and therapy sessions

Tele-rehabilitation: This type involves the delivery of remote rehabilitation services, such as physical therapy, occupational therapy and speech therapy, enabling patients to access care from the comfort of their homes

Teledermatology: Dermatology is a clinical specialty well suited for the use of telehealth technologies. It is one of the more common uses of both store and forward and interactive telehealth because of the visual nature of the practice (Idoga, Toycan, Nadiri & Çelebi, 2019). Dermatologists can provide high quality care to patients with diseases of their skin, hair, and nails using a variety of telehealth technologies

Telepathy offers numerous benefits for both patients and healthcare providers including

- **Improved access to care:** Telepathy helps overcome geographical and socioeconomic barriers to healthcare, making it more accessible for underserved populations
- **Enhanced quality and safety:** Telepathy enables real-time monitoring, proactive interventions and improved care coordination, leading to better patient outcomes
- **Cost Savings:** By reducing the need for in-person visits and hospitalizations, telepathy can contribute to cost savings for both patients and healthcare systems.

Besides, the electronic management of patient information is becoming more and more important and many hospitals are working towards digital storage of all patient associated data using electronic medical records (EMR) or electronic health records (EHR). But also in medical practice itself there are many new methods that directly depend on ICTs. In modern medical imaging such as CT (Computer Tomography) or MRI (Magnetic Resonance Imaging) but also in standard radiology (e.g. plain thorax x-ray) the conventional, film based equipment is more and

more replaced by digital radiology (DR), film-less solutions, in which all image data are primarily stored in electronic form and only transferred to film for reading in locations not (yet) equipped with digital X-ray viewing stations.

Another field where ICTs have become unavoidable is in the very heart of modern evidence based medicine today, access the evidence base has become almost impossible without the help of ICTs. Scientific articles are searched through PubMed, the on-line database of the National Library of Medicine. Articles are then accessed through “virtual libraries” in form of PDF (Portable Document Format) documents. Medical evidence databases such as e.g. Cochrane are commonly accessed over the web. Besides, there is an overwhelming amount of data accessible through the World Wide Web ranging from electronic teaching aids to on-line patient forums for almost any kind of disease.

Impact of Medical Telepathy on Healthcare Policies and Management

Telepathy helps to eliminate distance barriers and can improve access to medical services that would often not be consistently available in distant rural communities. In developed countries, access to healthcare services and practitioners with patient-doctors interaction are increasingly being boosted by the advent of Information and Communication Technology (ICT) (Benson & Dha 2011). Without distance being a barrier, healthcare professionals can now employ the services of telepathy towards efficient consultation with medical practitioners within and outside their geographic location, delivery of healthcare services and establishing continuous communication with their patients (Matawalli & Ibrahim, 2014).

Tools such as telepathy, teleducation and health informatics have of late been incorporated in the health sector to enable easy access to essential services, for example, in medical areas from referral centers by the patients on one hand and enabling the doctor to doctor consultations for the benefit of patients (Wamala and Kaddu, 2022). The World Health Organization (2009) defines e-Health as the cost-effective and secure use of information and communications technologies (ICT) in support of health and health-related fields, including health-care services, health surveillance, health literature, and health education, knowledge and research. Telepathy which is a subset of e-health is an integrated system of health-care delivery that employs telecommunications and computer technology as a substitute for face-to-face contact between health service provider and client (James *et al.*, 2022). Telepathy can improve the quality and accessibility of medical care by allowing distant providers to evaluate, diagnose, treat, and provide follow-up care to patients in less economically developed countries.

The Internet which serves as the backbone on which telepathy thrives provides opportunities to retrieve up-to-date information on different aspects of diseases interact and enhance communication among medical professionals and patients especially through videoconferencing facilities and medical data processing application in the health centers (James *et al.*, 2022). In Nigeria, not all parts of the country have access to internet and those that does pay heavily for it. Most telepathy services are always online and in real time, hence needs a fast, stable and uninterrupted internet service. Many physicians who travel to developing countries now take their laptops with them, or check in to internet cafes to maintain their medical contacts (Nakajima & Chida, 2020) Therefore, sustaining telepathy services in any country requires a stable communications strategy that connects the developing country with the global internet, without huge debts to pay for the connectivity.

Though, telepathy did exist even before the 20th century, but the inventions and advancement in the field of Information and Communication Technology (ICT) has eased and increased the vast scope of telepathy. It has become easy to send any kind of medical data anywhere across the globe for seeking medical help. Communication between the medical staff and doctors with expert opinion for the patient has changed the face of the treatment - videoconferencing, Teleradiology, Telenursing, Telepathology, Teleradiology and Telepharmacy. are some of them (Isabaliya, Mbarika & Kituyi,. 2021). Matawalli and Ibrahim (2020) pointed out that telepathy can be divided into three main categories: store-and-forward, remote monitoring and (real time) interactive services. Store-and-forward telepathy involves acquiring medical data (like medical images, biosignals) and then transmitting this data to a doctor or medical specialist at a convenient time for assessment offline. It does not require the presence of both parties at the same time. Example includes: Dermatology, radiology, and pathology.

Remote monitoring, also known as self-monitoring or testing, enables medical professionals to monitor a patient remotely using various technological devices. This method is primarily used for managing chronic diseases or specific conditions, such as heart disease, diabetes mellitus, or asthma (Idoga, Toycan, Nadiri & Çelebi, 2019). Interactive telepathy services provide real-time interactions between patient and provider, to include phone conversations, online communication and home visits. Many activities such as history review, physical examination, psychiatric evaluations and ophthalmology assessments can be conducted comparably to those done in traditional face-to-face visits. In addition, "clinician interactive" telepathy services may be less costly than in-person clinical visit.

Implications of Medical Telepathy on Quality and Safety of Care

The previous section demonstrated that telepathy, whether through medical practitioners or direct online channels, has been widely used and accepted as a viable option in a diversity of areas, specialties, diagnostic conditions, and applications (Hailey, et al., 2022). More important, the use of telepathy demonstrates that health communication between the patient and the health care provider has been made more rapid and efficient. Nevertheless, we would hope and expect that telepathy be more readily embraced as a tool by all medical specialists who desire to discover and ascertain its maximum potential and utility. In fact, telepathy offers a manifold of health communication benefits to both practitioners who engage its services and the health care system in general (Isabaliya, et al., 2021). Every individual can benefit from telepathy, from the patient, to the community, to physicians and other practitioners. With this prospect in mind, Jonathan & Gerald-Mark (2007) addressed and examined the effects of telepathy applications and features in the following sections. These effects of telepathy can be classified according to five main abilities: the ability of telepathy to:

- Transcend geographical boundaries;
- Transcend temporal boundaries;
- Reduce costs;
- Increase patient comfort, security, and satisfaction; and
- Digitize health communication via Web-based services.
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Ability to transcend geographical boundaries: Telepathy can alleviate the issue of imbalances in geographic allocation of resources, facilities, and personnel in the realm of health care. As

such, it increases and strengthens access to health communication and services among disadvantaged, disserved, secluded, and restricted communities and citizens (Idoga, et al., 2019). For instance, surgeons located in “remote areas” (Perednia and Allen, 1995) and who do not have the skills or experience to handle a particular surgical procedure can call on, through telepathy technologies, the immediate assistance/guidance of another doctor located at a far physical distance.

In a similar vein, a casualty of military combat could receive immediate communicative assistance in the field by linking up with a doctor through a portable telecommunications system. These two examples show that the use of telepathy has the potential not only to save more lives but also to improve health communication. It provides a sound escape or supplemental alternative from the conventional health communication in doctor–patient interactions such as those that engage face to face, in the same room encounters that are typical in relationships between healthcare practitioners, health care organizations, and practitioners and patients.

Ability to transcend temporal boundaries: Telepathy has demonstrated its capability to improve health communication by alleviating constraints induced by time (Idoga, et al, 2019). In fact, not only does a telepathy task not need real-time interaction, such as in the case of a remote expert consultation (Della Mea, 1999), but it also decreases patient anxiety caused by having to wait a longtime for a health care provider. Besides, still pictures over a phone line, amplified by direct oral communication, are user friendly and have proven to be useful in the pre-healthcare arena. Compact audiovisual technology enables fast, immediate, and personal visual and audible interaction with the patient. Now the doctor can perform auscultation and fundoscopic exams carefully and in real time.

Ability to reduce costs: Telepathy has been shown to be such an effective medical practice in several instances that its growth and application in the health care industry have raised tremendously. What should be emphasized here is that telepathy in many cases can minimize the escalating and draining costs of health services to all who benefit from it (Isabalija, et al., 2021). We all know that the costs involved in health care and the resources necessary to transport patients to other states or even countries can be enormous to some people. Therefore, expeditious access to telepathy can save both time and money. By the same token, it may be seen as an economical tool for bringing international health care dollars to the United States. One of the reasons for patient satisfaction with telepathy, according to Gutske *et al.* (2000), is a reduction in waiting time, travel time, and the time involved in arranging appointments. The absence of all of these issues can facilitate health communication by eliminating many of the burdens involved in standard health care.

Ability to increase patients comfort, security, and satisfaction: Another positive aspect of telepathy addressed by researchers and patients alike is that some patients appreciate the presence of several medical practitioners working on them concurrently. In this sense, according to Callahan, Hilty & Nesbitt (2021) many patients who underwent telepathy treatments felt more comfortable and assured with their cases while in the company of many collaborating doctors. Theoretically speaking, these higher levels of comfort and confidence among patients could be attributed to what media richness theory (Daft and Lengel, 2018) describes as an *enriched social presence* from several attending physicians (Turner, 2021). This multi doctor presence that is, several attending medical personnel collaborating and interfacing on one medical issue at hand can relieve or diminish the uncertainty and fear by the patient regarding his or her disease. These

researchers also found that the collaboration of doctors in these telepathy settings in fact improves the reliability of the diagnoses.

This, in effect, reduces the number or frequency of diagnostic mistakes. In addition to this increased diagnostic reliability, in the same train of thought, Web-based healthcare services (i.e., pharmaceutical companies, physicians' services, diagnostic information, etc.) offer substantial quantities and varieties of health information to Internet surfers. Plus, e-mail can be used as a communicative conduit by which medical practitioners can provide direct correspondence and advice to patients who choose to stay at home versus hauling themselves to clinics or hospitals for treatment purposes (Idoga, et al, 2019).

Studies have shown that by taking these popular and inexpensive health communication services into account, recent demand and utilization of these services have increased significantly (Isabaliya, Mayoka, Rwashana & Mbarika 2021). With this rapid and enormous elevation in Internet-based health care communicative services, one would logically expect that the demand for medical practitioners in clinics or hospitals would noticeably decrease in the near future, if in fact this has not already happened. The multiple parties involved have expressed that the experience is a type of educational enrichment, as several sources (i.e., doctors and other medical technicians) are exchanging information at one time (Whitten, 2019) and can communicate a rich pool of valid opinions on the medical case at hand. Beyond telepathy's general effectiveness, patients' opinions of how telepathy has positively affected them are readily apparent from research studies focusing on patient satisfaction concerning telepathy. According to Gutske, Balch, West & Rogers (2022), studies conducted by this team have revealed high levels of satisfaction among patients subjected to telepathy applications. Another area of patient satisfaction emerges from the use of videoconferencing.

Ability to digitize health communication via web-based services: Telepathy embodies and engages a sort of virtual domain, where the practice of health communication or services occurs in a virtual world (Turner, 2021), conducting medical procedures and interfaces within the limitations of time and space no longer presents serious issues in the face of telepathy technologies. In particular, with the advent of Web-based medical and pharmaceutical companies (e-health sites) that provide an enormous amount of information on nearly every condition, drug, and treatment, individuals can turn to these services to conveniently and rapidly obtain information that could otherwise be obtained by physically visiting and communicating with medical practitioners or pharmacists.

4. CONCLUSION

Telepathy, the use of telemedicine and telehealth technologies in healthcare, has emerged as a powerful tool with the potential to transform healthcare delivery and improve patient outcomes. By enabling remote consultations, remote patient monitoring and virtual care services, telepathy can address geographical and socioeconomic barriers to care, enhance the quality and safety care and contributes to cost savings. However, the successful integration of telepathy into healthcare systems requires addressing various challenges and consideration, including digital literacy and access, data privacy and security, ethical issues, infrastructure investment and quality assurance. Nurses and other healthcare professionals play crucial role in leveraging telepathy technologies, advocating for their effective implementations and shaping policies that promote equitable access to telehealth services

5. RECOMMENDATIONS

The following were recommended:

1. Government and regulatory bodies should establish clear guidelines, regulations and reimbursement models that support the implementations of telepathy in healthcare systems, ensuring data privacy, security and equitable access for all patients
2. Dedicate resources to improve internet connectivity, provide compatible devices and develop interoperable systems to facilitate the seamless integration of telepathy technologies
3. Digital divide should be address by offering education, training and support for patients and healthcare providers, enabling them to confidently navigate and utilize telepathy platforms and services
4. Health communication professionals should devise methods of approaching medical schools to encourage them to integrate courses into their programs that instruct the students on the most commonly used forms of telemedicine and the forms likely to be used in the future.
5. Establishing a basic understanding of what this medical technology can lead to will help health communication scholars enlighten the telemedicine debate by turning unique insights into more adequate approaches that will enrich and humanize mediated channels of health communication, thereby offering remedies and clarifications for effective health care exchange and delivery

REFERENCES

- Adenuga, K.I, Iahad, N.A, & Miskon, S. (2023). Towards reinforcing telemedicine adoption amongst clinicians in Nigeria. *International Journal of Medical Informatics.*;104:84–96.
- Ajala F. A., Adetunji A. B., & Akande N. O. (2022). Telemedicine acceptability in south western Nigeria: ts prospects and challenges. *compusoft, An nternational journal of advanced computer technology*, 4 (9): 1970-1976.
- Awolola O. J. (2023). “*Utilizing Telemedicine and eHealth to help with Capacity Building of Healthcare Professionals in Africa*”, excerpt from proposed West Africa Telemedicine Center of Excellence at the University Of lorin Teaching Hospital College of Health Sciences, Kwara State, Nigeria.
- Callahan, E., Hilty, D., & Nesbitt, T. (2021). Patient satisfaction with telemedicine consultation in primary care: Comparison of ratings of medical and mental health applications. *Telemedicine Journal*, 4: 363–369.
- Daft, R. and Lengel, R. (2018). Organizational information requirements, media richness, and structural design. *Management Science*, 32,554–571.
- Duru E. J. & Nwagbos C. (2022) “The Problems and Prospects of Public Health Care Development in Nigeria's Local Government System”, *Global Journal of Social Sciences*, 6(1), 51-56.
- Gutske, S., Balch, D., West, V. & Rogers, L. (2022). Patient satisfaction with telemedicine. *Telemedicine Journal*, 6: 5–13.
- Hailey, D., Ohinmaa, A. & Roine, R. (2022). Study quality and evidence of benefit in recent assessments of telemedicine. *Journal of Telemedicine and Telecare*, 10: 318–324.

- Idoga, P.E, Toycan, M., Nadiri, H., & Çelebi, E. (2019). Assessing factors militating against the acceptance and successful implementation of a cloud based health center from the healthcare professionals' perspective: a survey of hospitals in Benue state, northcentral Nigeria. *BMC Medical Informatics and Decision Making*. 2019;19:34–34.
- Isabalija, S.R, Mayoka, K.G, Rwashana, A.S, & Mbarika V.W. (2021). Factors affecting adoption, implementation and sustainability of telemedicine information systems in Uganda. *Journal of Health Informatics in Developing Countries*.5(2).1-12
- Isabalija, S.R, Mbarika, V. & Kituyi, G.M. (2021). A Framework for Sustainable Implementation of E-Medicine in Transitioning Countries. *International Journal of Telemedicine and Applications*.2013:1–12. .
- James, K. G, Odimayomi, P. Kayode, S. & Halilu, A. (2015). “Telemedicine Development in Nigeria. *National Space Research and Development Agency (NASRDA)*, Abuja-Nigeria.
- Matawalli, A. and Ibrahim A. (2020): Health Care Using Telemedicine: A Case Study of Yobe State, Nigeria. *International Journal of Computer Science and Network*, 3:5-11.
- Nakajima . and Chida S. (2022): “Telehealth n the Pacific: current status and analysis Report”, *Journal of Medical Systems*, 24, 321-31.
- Nakajima, I. and Chida, S. (2020). “Telehealth in the Pacific: current status and analysis Report”, *Journal of Medical Systems*, 24 (3): 21-31.
- Nigeria Demographic and Health Survey (2020). “National Population Commission, Abuja, Nigeria.
- Turner J. W., Robinson J. D., Alaoui A., Winchester J., Neustadt A., Levine B. A., Collmann J., Mun, S. K. (2021). “Media Attitudes vs. Use: the Contribution of Context to the Communication Environment in Telemedicine”, *Health Care Manage Review*, 28(2), 95-106.
- Turner, J. W. (2021). Telemedicine: Expanding healthcare into virtual environments. In: T. L. Thompson, A. M. Dorsey, K. I. Miller, and R. Parrott (Eds.), *Handbook of health communication* (pp. 515–535)..
- Van Gorp J, Soyannwo O, Odeunmi K, Dania S, Van-Selm M, & Van Leeuwen E. (2021). Telemedicine’s Potential to Support Good Dying in Nigeria: A Qualitative Study. *PLOS ONE*.;10(6), 34 -43.
- Wamala, D. S. & Kaddu A. (2022): “A MetaAnalysis of Telemedicine Success in Africa”, *Journal of Pathology nformatics*, 4(6), 98-121.
- Whitten, P. (2019). Systematic review of studies of patient satisfaction with telemedicine. *British Medical Journal*, 320: 1517–1520.