

REFERRAL AND PRESCRIPTION IN FAMILY PRACTICE

DR.ARUNI DE SILVA

REFFERAL



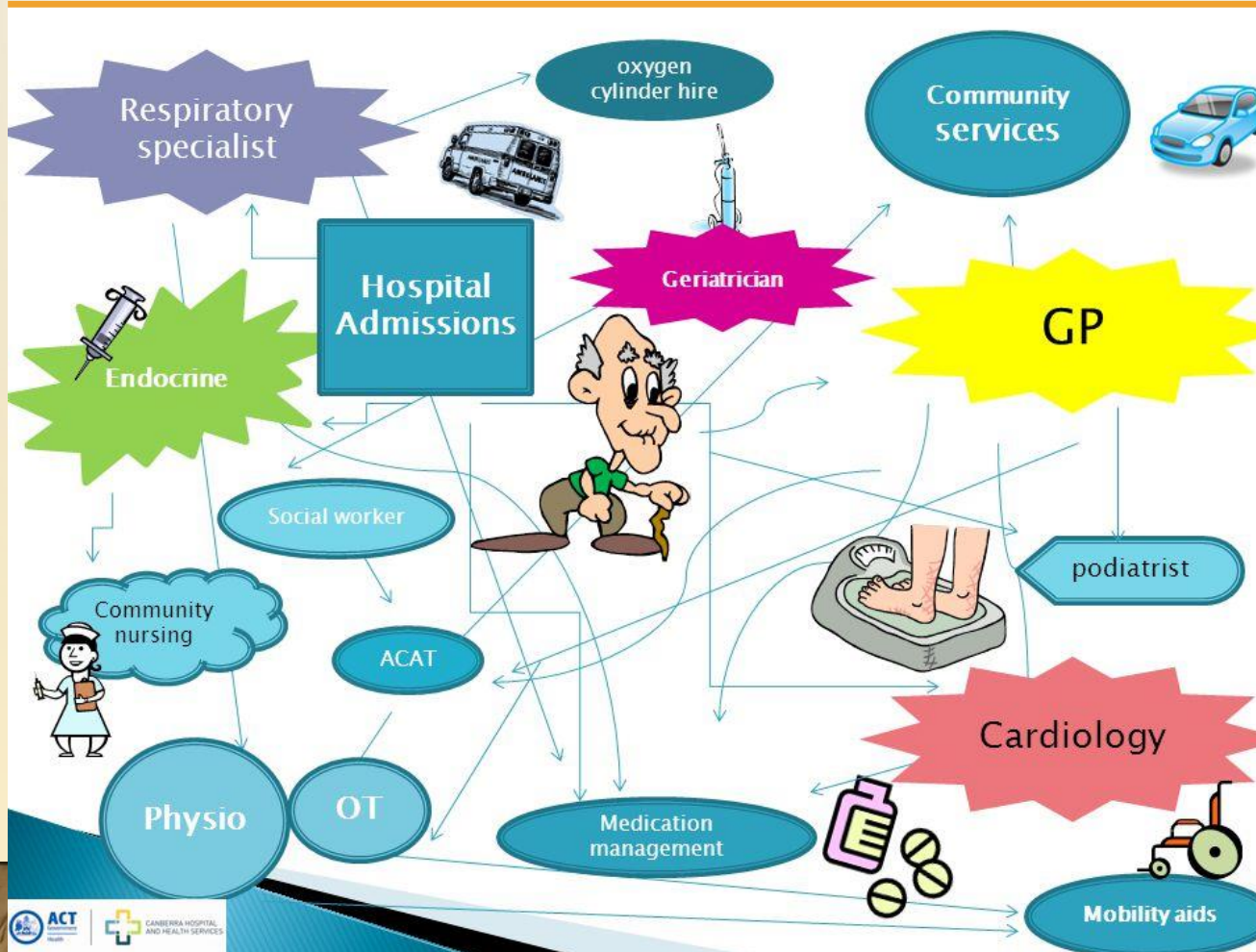
REFERRAL

- Referral of patients to hospitals, specialists and other institutions is an essential part of primary health care.
- Referral has considerable implications for patients, health care system and health care costs

- Primary care physicians

“doctors who have a large measure of expertise in breadth unlimited by age, sex, body system or type of problem (physical/psychosocial)”

COORDINATION OF CARE





Allied health services -Dietetics, Exercise Therapy, **Occupational Therapy, Physiotherapy, Podiatry, Prosthetics/Orthotics, Psychology, Social Work, and Speech Pathology**

-
- "Variation in referral rate implies either marked differences in the prevalence of serious illness - which is unlikely - or that, at one extreme, some doctors fail to recognise the need for specialist assistance and, at the other, some pass their clinical responsibilities to specialists too readily" (1)

Reference:

Health Trends (1991), 23, 66-9.

REFERRAL

referral

“an appreciation of the limitation of their expertise in depth”

Leela Karunaratne

Should not hesitate when necessary

CONSULTATION OR REFERRAL

□ Consultation – When a doctor requests a second opinion from a specialist

-Specialist advise regarding diagnosis & management

□ Referral – Family physician transfers the responsibility to a specialist for the care of a particular problem

INDICATIONS FOR REFERRAL

- Doubt about diagnosis or management
- Serious illness
- Need observation
- Has to be managed by a specialist
- Services available in the community
- Limitations in facilities – diagnostic and therapeutic

INDICATIONS FOR REFERRAL.....

- patient or relatives' anxiety or pressure for a second opinion
- reinforcement of advice in poorly compliant patient
- sharing the load of a difficult or demanding patient
- deterioration in the patient-doctor relationship so that one party wishes to involve someone else in management
- fear of malpractice litigation

TYPES OF REFERRAL

- Routine referral
cataract in eye
- Urgent referral(approx. 2 weeks)
keratitis
- Emergency referral(same day)
Acute angle closure glaucoma

STEPS IN REFERRAL

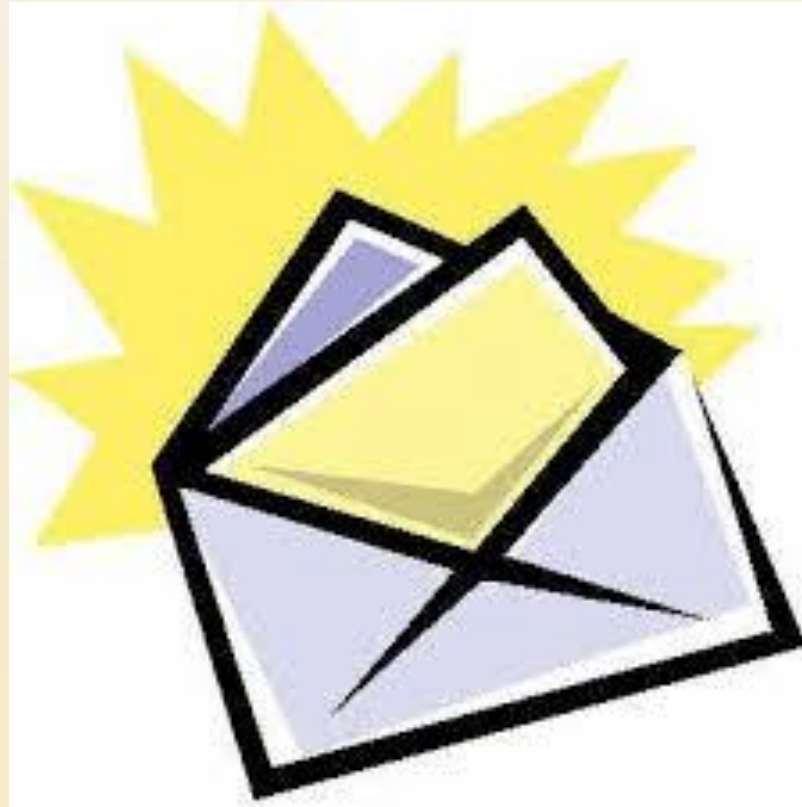
- Explain the disease probabilities and why it is necessary
- Ask what is his preferred setting Government/ private. Preferred hospital, doctor
- Write a referral letter with details of the history and what the GP wants to be done
- Explain how to visit the doctor / hospital
- Explain what to expect- the procedure, bowel prep etc



STEPS IN REFERRAL

- If possible try to coordinate by talking to referring doctor
- Request to come back after the procedure to maintain continuation of care
- Ask for any clarifications/ need to talk to family members

REFERRAL LETTERS





WRITE A REFERRAL LETTER

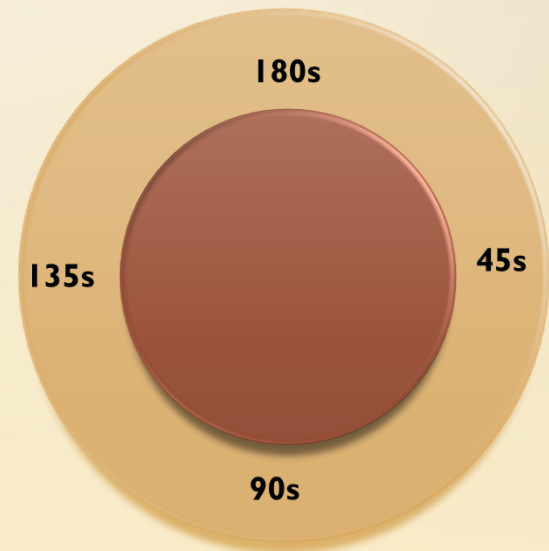
- 24 year old Ajith presents to you with right sided abdominal pain for one day. You elicit tenderness and guarding in RIF.
- Known asthmatic

WBC/DC total : 12500

N- 79%, L – 18%, E – 3%

UFR – no red cells

- 3-4 pus cells



Name & designation of
specialist, qualifications

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Dear sir,

Mr. Ajith, 24yrs

This pt. presented to me with right sided abdominal pain for one day. tenderness
& guarding was elicited over RIF.

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. www
Consultant

Patient's name and age

Dear sir,
Mr. Ajith, 24yrs

This pt. presented to me with right sided abdominal pain for one day. tenderness
& guarding was elicited over RIF.

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Presenting symptom

Dear sir,
Mr. Ajith, 24yrs

This pt. presented to me with right sided abdominal pain for one day. tenderness
& guarding was elicited over RIF.

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Physical
signsqua

Dear sir,
Mr. Ajith, 24yrs

This pt. presented to me with right sided abdominal pain for one day. tenderness
& guarding was elicited over RIF.

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Dear sir,

Mr. Ajith, 24yrs

This pt. presented Investigation results abdominal pain for one day. tenderness
& guarding was

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Dear sir,

Mr. Ajith, 24yrs

This pt. presented Investigation results, abdominal pain for one day. tenderness
& guarding was

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Dear sir,
Mr. Ajith, 24yrs

This pt. presented to me with right sided abdominal pain for one day. tenderness
& guarding was elicited over RIF.

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

Relevant past medical
history

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Dear sir,

Mr. Ajith, 24yrs

This pt. presented to me with right sided abdominal pain for one day. tenderness
& guarding was elicited over RIF.

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

What is expected
from specialist

Thanks

.....

Dr. yyyyyyyyyyy(Seal)

Family practice centre
Ragama.
2018/05/20

Dr. wwwwww
Consultant surgeon,

Dear sir,
Mr.Ajith, 24yrs

This pt. presented to me with right sided abdominal pain for one day. tenderness & guarding was elicited over RIF.

FBC showed increased leukocyte count with neutrophilia.

UFR – normal

? Acute appendicitis

He is a known asthmatic

Please take him over for further management

Thanks

.....

Dr. yyyyyyyyyy(Seal)

MBBS, FM

Family Practice centre, Ragama

GP's name, address,
contact number

OTHER INFORMATION.....IN A REFERRAL LETTER

- What has been done so far & treatment given
- Relevant family & social history
- Any current medication
- What is expected from specialist
 - Advice regarding diagnosis & management
 - Specialist to take over for further management

Name
Address & Tel no

Routine/Urgent/Emergency

Referral Letter

.....
.....

Date:.....

Dear Doctor/Sir/Madam,

Name:.....Age:.....

Symptoms and signs:

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.....
.....
.....

Ix results:.....

.....
Treatment given:.....
.....

Probable diagnosis:.....

Comobidities/PMH:.....

Rx for comorbidities:

.....
.....

Allergies:.....

Family/Socila Hx:.....

Reason for referral:

.....

.....
Dr's Name, Qualifications & Reg no

ADVANTAGES OF A REFERRAL LETTER

- Saves time for the patient & recipient
- Prevent delays in diagnosis & treatment
- Prevent repetition of investigations
- Prevent polypharmacy
- Decrease health care costs
- Maintains continuity of care
- Prevents patient dissatisfaction
- Prevents loss of confidence in doctors

FEATURES OF A GOOD REFERRAL LETTER

- Adequate information
- Legible & clear format – easy retrieval of information
- Reflect diagnostic skills
- Reflect communication skills
- Professionalism
- courtesy

RESEARCH ON REFERRAL COMMUNICATIONS IN SRI LANKA

Summary of Findings

- GPs do not write referral letters always although specialists expect letters.
- Quality of referral letters is not satisfactory.
- Specialists do not reply most of the time although GPs expect replies.
- Time constraints was a main reason for not writing letters by both GPs and specialists

Name
Address & Tel no

Routine/Urgent/Emergency

Referral Letter

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.....

Date:.....

Dear Doctor/Sir/Madam,

Name:.....Age:.....

Symptoms and signs:

.....
.....
.....
.....

Ix results:.....

.....

Treatment given:.....

.....

Probable diagnosis:.....

Comobidities/PMH:.....

Rx for comorbidities:

.....

.....

Allergies:.....

Family/Socila Hx:.....

Reason for referral:

.....

.....
Dr's Name, Qualifications & Reg no

Emergency/urgent/Routine

Referral Letter

Date:

Dear Dr/Sir/Madam,

Name: Age:

Symptoms & signs:

.....

.....

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.....

.....

Ix results:

.....

.....

Treatment given:

.....

.....

Probable diagnosis:

Comorbidities/PMH:

Rx for comorbidities:

.....

.....

.....

Allergies:

.....

Social/ Family Hx:

Reason for referral:

.....

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Thanking you,

.....

.....

Dr. Janaka Ramanayake (MBBS,DFM & MD[family medicine])

Thanks for seeing this patient and I appreciate a feedback if time permits.

Please return the attached letter through patient/care givers.

Reply Letter

Date:

Name:

Diagnosis/Probable Diagnosis:

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Plan of Management :

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Instructions to Family doctor

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I would like to review this patient on

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.....
You may detach here.....

PRESCRIPTION

PRESCRIPTION

- I. Therapeutic purposes
 - Cure of a disease
 - Relief of symptoms
 - Control of disease process
 - Prevention of complications

-
- 2. Tactical reasons
 - patients insist

FACTORS AFFECTING COMPLIANCE

Doctor factors

- Strong doctor patient relationship
- Effective two way communication
- Clear instructions

Drug factors

Simple affordable regimen

Acceptable side effects

Fast response

FACTORS AFFECTING COMPLIANCE.....

Patient factors

- Attitudes
- Trust towards the doctor
- Past experience

FACTORS TO BE CONSIDERED

I. Drug factors

- Effectiveness & cost
- Contraindications
- Drug interactions
- Side effects

2. Patient factors

- Age & sex
 - Physiological status
 - Disease
 - Allergies
 - Side effects
 - Other medication
 - Socio economic status
 - Occupation, religious & cultural beliefs
-

Suwa family Medical center
No 6, Gemunu Rd, Ragama.

Tel:xxxx

Mr. xxxx
45 years

Date 05/07/06

Rx

1. Paracetamol 1g 8 hly x 5/365
2. Amoxycillin 250mg 8 hly x 5/365
3. Chlopeniramine 4mg bd x 5/365

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Dr. yyyyyyy (with stamp)
MBBS, DFM
SLMC Reg.no 1111

COMMON ABBREVIATIONS USED IN PRESCRIPTIONS

- <https://www.drugs.com/article/prescription-abbreviations.html>

Special instructions

Do not substitute

S.O.S.

Do not repeat

WHEN IS WRITING THE BRAND NAME IMPORTANT

- Combined forms
- Drugs with narrow therapeutic index – warfarin
- Modified release forms

MEDICAL CERTIFICATES

- Take leave from work
- Insurance purposes
- Certify – fitness
 - employment
 - driving vehicles
 - go abroad

COMPONENTS OF A MEDICAL CERTIFICATE

- Name of the patient
- Duration of leave recommended and from which date
- ? disease
- Signature & seal of the doctor
- Dr's Name, address, SLMC reg. no
- Date of issuing medical certificate

Blue cross Family Practice Center

No: 20, temple road, ~~Ragama~~

Tel: 011234565

Medical certificate

To whom it may concern.

This is to certify that Mr./Ms. aged year of
(address) baring NIC No. Whose signature is given bellow was examined and treated at Blue cross Family Practice
Center on/...../20.... . She was treated for I consider a period of absence of work for days with
effect from/...../..... to/..... is necessary to restore his/her Health.

Name of patient:

Date of Birth:

NIC number:.....

Attending physician

Signature

Dr.....

MBBS

SLMC Reg.

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- Acknowledgements

Prof Janaka Ramanayake for sharing the slides

Thank you