

GP uses prof to prof clinical decisions to speak to an Acute Medicine Consultant

Specialty mentioned: Acute Medicine

Dr Rod Fleming describes how he uses rapid prof to prof clinical decisions via Consultant Connect to speak to local hospital consultants about his patients.

Dr Rod Fleming has been a GP for 20 years. He is a GP at Erskine Practice which is part of NHS Tayside Health Board. Prof to prof clinical decisions have been available in this area since September 2018 and Dr Fleming uses the service to speak to local consultants at Ninewells Hospital.

Dr Fleming thinks that prof to prof clinical decisions is a good tool and says:

“I can directly call the appropriate consultant and it also frees up time for the hospital switchboard service.”

This is better than the methods he previously used to get advice, as these often included:

“bleeping the on-call consultant through switchboard.”

Dr Fleming recommends the service to other GPs, he says:

“It is very useful to use to get advice on any patient who you think may or may not need an admission and/or who may benefit from a specialist opinion.”

We asked Dr Fleming to provide an example of when he used the prof to prof clinical decisions service to benefit a patient.

GP avoids admission for patient with possible pneumonia or influenza

“I contacted the Acute Medicine consultant about a 27-year-old woman who presented with a one-week history of a flu-like illness with a dry cough, vomiting and left sided chest pain. She was noted to be pyrexial and tachycardic but had a normal sounding chest and normal O2 saturations. I suspected it was either a community acquired pneumonia or influenza and wanted to get an urgent CXR.”

How prof to prof clinical decisions helped:

Dr Fleming used rapid prof to prof clinical decisions to speak to a local Acute Medicine Consultant who “agreed that if the patient attended hospital, they would look at the CXR on PACS and call the patient with the results.”

The patient was prescribed antibiotics in case of pneumonia. “The CXR did not show any initial changes though the radiologist did report signs of possible pneumonia. Using prof to prof clinical decisions meant the patient was managed in the community avoiding the need for a hospital admission.”

If you have any questions about this service, please get in touch at hello@consultantconnect.org.uk or on 01865 261467.