

BASIC DIAGNOSTICAL ACTIVITY, SMALL-SURGERY PROCEDURES, TEAM-WORK AND TELEMEDICINE SOLUTIONS IN PRIMARY RECEPTION. HOW IT AFFECT FORWARDING AND FINDING SERIOUS CASES.

15th Wonca Europe Conference 2009 in
Basel, 16-19.09.2009



MADIS VESKIMÄGI, MD

HEALTHCENTRE OF TÕSTAMAA

HOSPITAL OF PÄRNU COUNTY, EMERGENCY RECEPTION

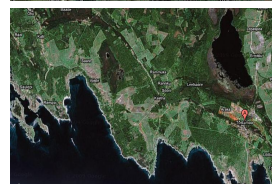
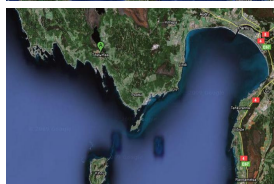
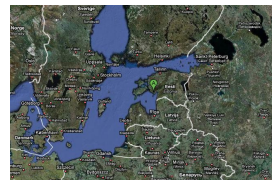
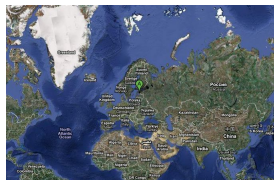
DEPARTMENT OF FAMILY MEDICINE, UNIVERSITY OF
TARTU

ESTONIA



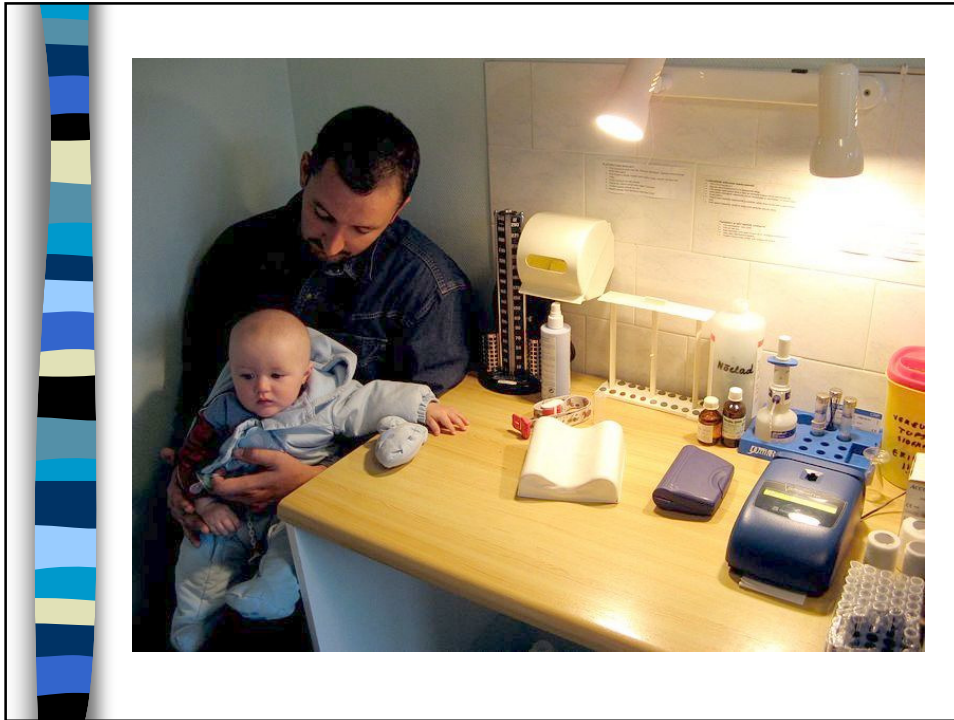
INTRODUCTION AND BACKGROUND

- Tõstamaa-Varbla is rural area in south-western part on Estonia, Pärnu county.
- There is in area approximately 2400 inhabitants, from two parish
- Distance to nearest hospital 50 km



- Medical team consist 4 worker- specialised family doctor, 2 well educated nurse (medical attendant, velsker) and nurse
- Medical service take place in healthcare centre with basic equipment for laboratory, functional and imagine diagnostics
- Time critical, point of care laboratory test
 - CRP quantitative detection, result 2-3 min
 - Hemoglobin
 - Whole blood
 - Blood sugar (enable glucose and lactose tolerance test)
 - Strep A
 - Urine test (dip-stick, U-Alb, cultural investigation)
 - Stool (FOB, H.pylori, Rota-Adenovirus)
 - HCG test from serum and urine





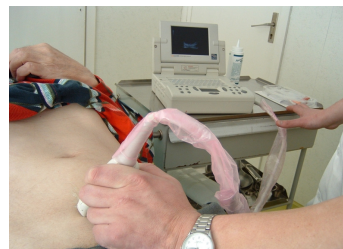
■ Functional diagnostics

- ECG, digital
- Stress-test on veloergometer, digital
- Spirography
- Tympanometer, M.stapes reflex, digital
- 24 H blood pressure monitor, ABPM, digital



■ Imagine diagnostics

- X ray, standard position
- Portative digital ultrasound- investigation of abdomen, thyroid, superficial tissues





- Small-surgery room with basic equipment, practical skills of medical team





AIMS AND PURPOSE OF STUDY

- Aim of present study is to get an overview patients amount, work which is done by doctor and nurse
- Data of forwarding on urgent, telemedicine and ordinary way grouped by speciality
- Therefore to find number of patient who remain on the responsibility of family doctor




DESIGN AND METHODS

- Retrospective statistical analysis of healthcare centre reception, based on electronical data record and analysis of covering notes during time period 01.01-31.01.2008



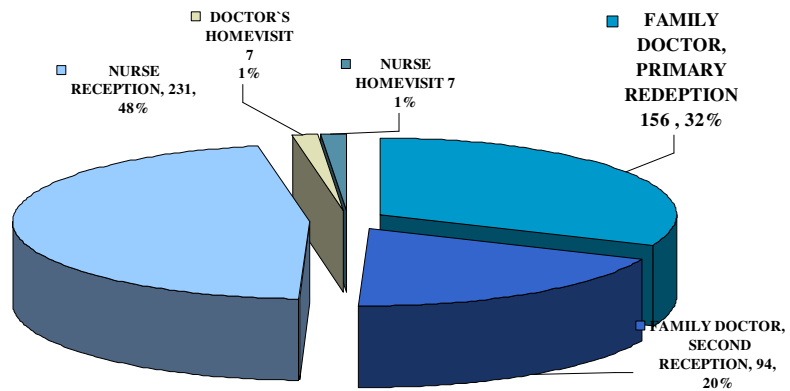
RESULTS

- During period 01.01-31.01.2008 there is done 481 out-patient reception
- 156 (32%) physician`s primary, and 94 (20%) repeated reception and 7 homevisits.
- By nurses is done 231 (48%) intependent receptions and 7 homevisits.
- Number of out-patient`s consultation is 33, 5 of them is done by e mail consultation.

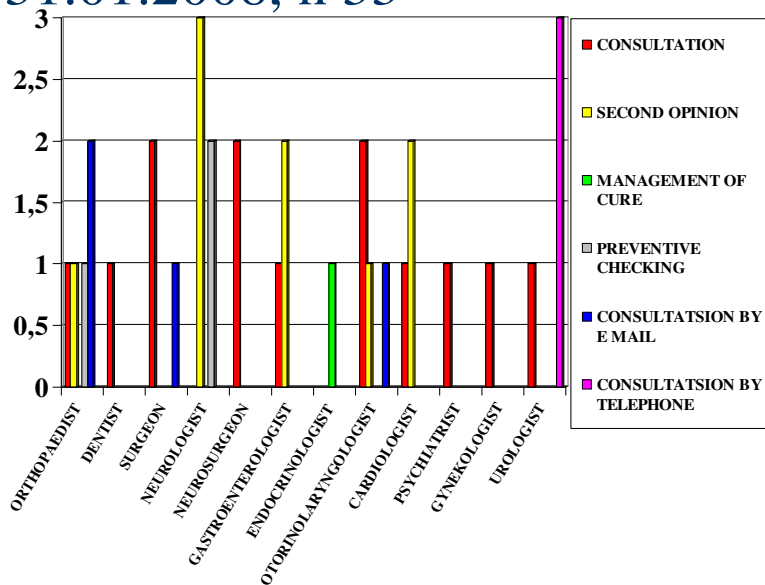
- 
- There were find 4 emergency cases which is forwarded to hospital urgently
 - Mycardial infarction, main complain was wrist pain
 - Acute hydronephrosis, main complain was back ache
 - Severe macrocytic anaemia, main complain was tiredness
 - Severe heart insufficiency
 - On ordinary way there is forwarded to hospital 8 patient
 - 93,5% of all patient`s remain on responsibiliy of family physician`s team

OVERVIEW OF WORK, 01.01-31.01.2008

481 reception, 14 homevisit

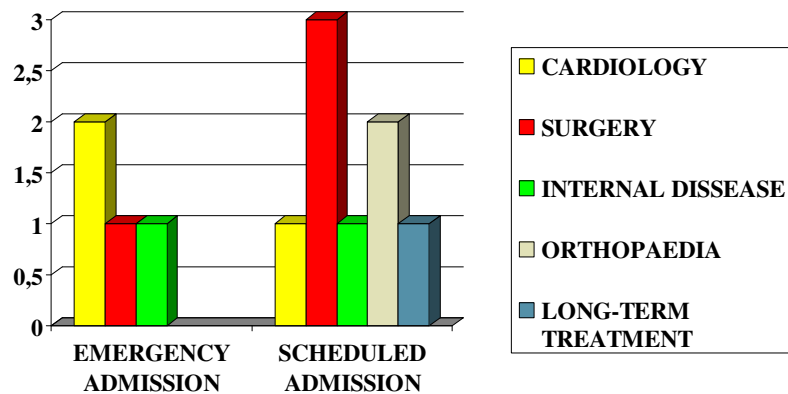


OUT-PATIENT CONSULTATION 01-31.01.2008, n 33



ADMISSION TO HOSPITAL

4 EMERGENCY CASE; 8 SCHEDULED CASES



CONCLUSIONS

- Due to available basic point of care diagnostic equipment and team-work there is possible to find without any delay on primary reception serious cases which need urgent referral and consultation
- Majority of patient (93%) remain on responsibility of family physician's team, their problem is resolved by ordinary treating, small-surgery procedures or follow-up
- Basic diagnostic activity during reception reduced uncertainty, we can save time from several "small" visits and waiting time for investigation
- It increase satisfaction of patient, nurse and doctor

1. Pea kohiret - raskustunde sarnilased vaimud
2. Siinud on loogised siigeldused, liivulavad
võgi allu situm.
3. Nina on alataha kinni - hingam senn kaudu
4. Hambarid on vullunud ja võtga tõmmatud.
5. Nõrased kõrvad on alataha mingi kõva
mille ära peasa nähtavina.
6. Kõne rõõgine on vist ära sügurdunud.
7. Põlved ärg on koiige, küll kõnle valdes
nõrk, küll mingi pehke, mis ei jätka ahtk.
8. Nõrased küigi peal ei saa magada - pea
kõrkuval mingi karmia ja võtga vullunud
pea see karmistim - mille lõpus on valgete
võtga agra pool on imeliseid vullude.
võrk kalle veri vaurukis vaurukis vaurukis (Rx)
9. Öösel, vullunud, äkk kappesitumised
kõnle pöördunud, ääres värvunud
üle kõi värvuna, tead on võtga aga
võrk kalle on pea ja kõnle pöördunud 38°
mis vaurukis vaurukis vaurukis, paari karmia.
10. Öösel draak üle ja olea vulluna kigi.
11. Sageli karmia öösel, et võtga mis vaurukis
vaurukis - võtga mis vaurukis, vaurukis ei ole
aga on imelise karmia.
12. Kõnle vaurukis on aeglas - pisike vaurukis
karmia. Võtga ei tule - pall on aeg.
Pea pöördunud ja vaurukis vaurukis.
13. Jalad - võtga vullunud. Siinud vaurukis
vaurukis agra, vaurukis, vaurukis, vaurukis.
Pöördunud loogised, rõõgised, karmia
pöördunud vaurukis karmia karmia. Karmia -
jalad karmia vaurukis, paari karmia.
Nõrased karmia vaurukis 20 aastat.
14. Selg on eluaga karmia vaurukis, vaurukis
vaurukis aga aga vaurukis, et ei saa vaurukis
karmia

“ALL MY COMPLAINS” FEMALE, 63 y.

15. Igal hommikul peasa rõõgitud
karmia vaurukis, pöördunud vaurukis.
16. Siinud vaurukis vaurukis vaurukis vaurukis
vaurukis vaurukis.
17. Te sa imelise, et karmia vaurukis!
18. Alataha mingi vaurukis vaurukis, mis
10 päeva juba, pöördunud, vaurukis vaurukis
vaurukis vaurukis. Mis vaurukis vaurukis
vaurukis vaurukis vaurukis.
19. Nõrased, vaurukis, vaurukis, vaurukis.
20. Pöördunud peasa karmia vaurukis, vaurukis
vaurukis karmia vaurukis.

THANK YOU FOR ATTENTION !