HTTG Workshop: Defining the medical imaging requirements for a health station

Patient referral to secondary and tertiary health care levels

Patrick Cadman

Medical Physics
Saskatoon Cancer Centre
Saskatoon, Saskatchewan, Canada

When is patient referral from a health station to secondary or tertiary health care levels appropriate and how should this happen?

What procedures should be conducted at the local health station?

Diagnostic Imaging Referral Guidelines

All medical imaging procedures should be chosen according to national or international referral guidelines to insure the procedure is <u>appropriate</u> and radiation <u>exposures are minimized</u>.

- Achieve best quality & safer use of medical imaging

- Prevent underuse or overuse of diagnostic imaging relative to the evidence base (appropriate with minimal cost)

International guidelines applicable to developing countries are being drafted by the International Radiology Quality Network (IQRN)), initiated by the WHO

What if the local <u>capacities</u> or <u>capabilities</u> of the health station are exceeded?

Specialist consultation

Health station personnel should understand and acknowledge the capacities and capabilities of the health station for each common clinical situation (local guidelines).

If these are exceeded or if there is doubt as to whether an investigation is required or which is best, an appropriate specialist should be consulted.

Specialist consultation

Request for advice should be triaged so that specialist resources are used in an <u>appropriate and timely</u> manner

Consultations that result in patient referral to secondary or tertiary health care levels should be <u>coordinated</u> to ensure <u>continuity of care</u>

Critical Public Health Issue

The functional links between centers of differing degrees of complexity should be clearly established in order to ensure smooth referral and counter referral processes and guarantee continuity of care for patients who require it

RAAPID

Referral, Access, Advice, Placement, Information and Destination

RAAPID is a call centre oriented service designed to provide a single point of contact for physicians and health care providers to access appropriate and timely advice, referral, admission, discharge, repatriation and transportation for their patients.

In operation in Alberta, Canada

RAAPID

Access critical and/or urgent consultation with a specialist, and if necessary, facilitate transfers to a tertiary care facility;

Arrange repatriation to return the patient to their sending institution or closest health care facility within their community following an acute episode; and

Archive all calls to serve as a legitimate medical record.

RAAPID

Key Elements

Provides a single point of contact for coordinating seamless transitions of care

Coordinator (usually a nurse with ER experience) manages all consultations/transfers according to guidelines (and personal expertise) and resource availability information

Can set up connection between referrer and specialist by available telemedicine pathways (e.g. direct dial, videoconference, etc.)

RAAPID

Example

Health station contacts RAAPID regarding a patient having an acute episode;

RAAPID coordinator determines that a consultation with a radiologist is required and that patient should be referred for an examination at tertiary care facility;

Coordinator arranges patient transport to tertiary care facility;

Coordinator sets up teleconference between referrer and radiologist to discuss results;

RAAPID

Example (cont.)

Coordinator documents initial call and is linked into the actual consultation by audio to capture the rest of the record. All information is entered into a database to serve as a legitimate medical record;

The referring site documents the consultation and care at their end and is able to access RAAPID documentation;

Patient transfer home, etc. is managed by Coordinator.

RAAPID

Stregnths

Patients are more likely to be referred only when necessary based on appropriate use of available resources;

Coordination of resources ensures continuity of care;

Referrers remain connected to all information regarding their patient's care.

Discussion

Can RAAPID principles be used to provide the functional links between the health station and secondary and tertiary health care levels?

Obrigado