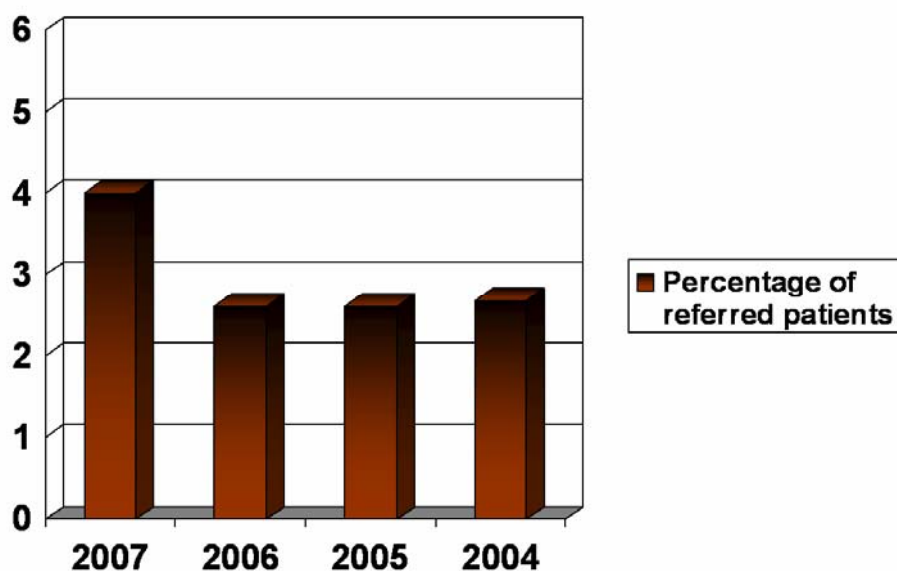


**Family Physician Corner****Referrals from Primary Care - Ways of Optimization**

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Most patients attending primary care are managed within the facility. Only 5% of all primary care patients are referred to a secondary care<sup>1,2</sup>. Bahrain's statistics is not far from that. In 2007, the total number of patient consulted was 3,265,356. Of those 134,018 (4%) were referred. Sixty three percent were referred to accident and emergency department and 37% to out-patients clinics<sup>3</sup>. See Figure 1.



**Figure 1: Percentage of Referred Patients from Health Centers in Bahrain<sup>3</sup>**

Referrals pose a great challenge to the primary care doctor. Before making the decision to refer, doctors often think of the following: is it necessary to refer the case or can it be managed at the health center. What is the best specialty to manage the case? Am I going to have a feed back? How am I going to learn from this case?

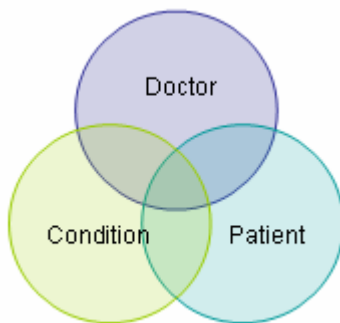
All these queries in addition to the nature of the condition, the patient's opinion and the appointments waiting list could have a great influence on the referral decision.

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## Why Refer

Factors affecting the decision for referrals can be categorized into 3: Doctor related, condition related and patient related, or a combination of all, see Figure 2. Doctors refer patients to have a second opinion when they are uncertain about the diagnosis, or how to diagnose. Difficult or severe conditions requiring further sophisticated diagnostic or therapeutic tools which are unavailable at the primary health care level. On occasions, doctors find themselves referring patients upon their or other parties' request<sup>4</sup>. Some even go farther to include other influencing factors related to the doctor (sex, age, years of and type of experience, personality, and practice style) and those related to the patients (sex, age, social class, case mix, and number of previous consultations), and access to specialist care<sup>5</sup>.



**Figure 2: Factors Affecting Referrals**

## Whom to Refer to

In the past where the system was less sophisticated, primary care doctors preferred to refer patients to a familiar specialist. However, with increased diversity of specialties in medicine, doctors frequently find themselves referring patients to specialist whom they are not familiar with<sup>6</sup>.

Kinchen et al conducted a survey to determine the factors important in choosing a specialist<sup>6</sup>. The majority (88%) considered the medical skill of the specialist to be of major importance. Previous experience with the specialist was considered of major importance by 59%. The timeliness of the patient's appointment came third 55%. The quality of specialist communication to the primary care physician was 53%, and the specialist's efforts to return the patient to the primary care physician was 51%<sup>6</sup>.

In Bahrain, primary care physicians have limited options. They usually refer patients to governmental secondary and tertiary care facilities which are freely available for citizens and residents. Only small fees are collected from non-Bahrainis. Currently, Salmaniya Medical Complex is the major governmental hospital in the country. King Hamad General Hospital is expected to be opened for the public by the end of 2010. Another option is Bahrain Defense Force Hospital (military), which charges fees for non military members. Although, physicians are not officially limited to those governmental services, doctors only refer a minority of patients to private practices.

## Importance of Referral Letter/Form

There is a consensus that referral letters/documents could markedly facilitate the process of referring patients<sup>7</sup>. It is evident from a Cochrane review on “Interventions to Improve Outpatient Referrals from Primary Care to Secondary Care” which conclude that there are a limited number of rigorous evaluations to base a certain policy on. However, they found that “active local educational interventions involving secondary care specialists and structured referral sheets are the only interventions shown to impact on referral rates based on current evidence”, “The effects of ‘in-house’ second opinion and other intermediate primary care based alternatives to outpatient referral appear promising”<sup>8</sup>.

In order to minimize the lack of significant and relevant clinical information, confusion about the exact specialty and the appointment date many health authorities implemented a template document which should be filled by the referring doctor and on occasions by both the referring doctor and the specialist.

The aim of the letter/form is to provide patient’s characteristic data, the relevant clinical information and it is possible for the referring doctor to add information which would be otherwise unavailable to the specialist. The referral letter/form could be used by medical records, appointments system, health staff and it could include some administrative information.

Lately, the ministry of health in Bahrain had issued a new modified referral form which is very similar to the previous one except for the addition of few items such as the facility (hospital) the doctor is refereeing the patient to, a detailed emergency clinics choices and patients instruction (Figure 3). This single page form comes in three carbonated copies, the original returns to the requesting facility the yellow copy goes to the hospital medical record and the blue one is retained by the requesting facility.



REFERRAL FORM

PERSONAL DATA	البيانات الشخصية
Patient's Name	اسم المريض
CPR Number	الرقم السكاني
Phone	الهاتف
Health Centre (HC)	المركز الصحي
Medical Record No.	رقم الملف بالمركز الصحي
Treating Physician	اسم الطبيب المعالج

History of Allergies

TO BE COMPLETED BY REQUESTING DOCTOR (Justification of Referral)

Medical History

Physical Findings

Investigations (done at HC)  Not Done  Done & Attached  Requested on / /

Provisional Diagnosis

Treatment Given (include all current medications)

Doctor's stamp

Doctor's sign

HC Telephone

Ext.

Date

SMC (Salamiya Medical Complex)

BDF Hospital (Bahrain Defense Force)

KHH (King Hamad Hospital)

Others

Accident and Emergencies A/E Clinics

A&E Department

ENT Emergency Clinic

Gyne/Obs A&E

Ophthalmology Emergency Clinic

APPOINTMENT SCHEDULED موعده مع الطبيب

اليوم Day التاريخ Date الوقت Time الطبيب Doctor

Referral to: جهة التحويل

Department				
<b>MEDICAL</b>	<input type="checkbox"/> Hematology	<b>PEDIATRIC</b>	<input type="checkbox"/> Oncology	<b>DENTAL</b>
<input type="checkbox"/> Cardiology	<input type="checkbox"/> Neurology	<input type="checkbox"/> General Pediatric	<input type="checkbox"/> Hematology	<input type="checkbox"/> Oral & Maxillofac
<input type="checkbox"/> Pulmonary	<b>SURGERY</b>	<input type="checkbox"/> Cardiology	<b>OPHTHALMOLOGY</b>	<input type="checkbox"/> Periodonti
<input type="checkbox"/> TB	<input type="checkbox"/> General Surgical	<input type="checkbox"/> Nephrology	<input type="checkbox"/> General Eye Screening	<input type="checkbox"/> Endodonti
<input type="checkbox"/> Endocrinology	<input type="checkbox"/> Urology	<input type="checkbox"/> Neurology	<input type="checkbox"/> Chalazion	<input type="checkbox"/> Orthodont
<input type="checkbox"/> Gastroenterology	<input type="checkbox"/> CVS/Thoracic	<input type="checkbox"/> Child Development	<input type="checkbox"/> GENERAL E.N.T	<input type="checkbox"/> Pedodonti
<input type="checkbox"/> Immunology & Allergy	<input type="checkbox"/> Neurosurgery	<input type="checkbox"/> Neonatal clinic	<input type="checkbox"/> GENETIC COUNSELING	<input type="checkbox"/> Conservat
<input type="checkbox"/> Infectious Diseases	<input type="checkbox"/> Pediatric Surgery	<input type="checkbox"/> Infectious diseases	<b>DERMATOLOGY</b>	<input type="checkbox"/> Geriatrics
<input type="checkbox"/> Rheumatology	<input type="checkbox"/> Orthopedic	<input type="checkbox"/> Gastroenterology	<input type="checkbox"/> OBS/GYN	<input type="checkbox"/> OTHERS
<input type="checkbox"/> Nephrology	<input type="checkbox"/> Pediatric Orthopedic	<input type="checkbox"/> Endocrinology	<input type="checkbox"/> PSYCHIATRY	
<input type="checkbox"/> Oncology	<input type="checkbox"/> Fracture	<input type="checkbox"/> Respiratory		

Notes

Patients Note for Outpatient Clinic

هذا التحويل ساري لمدة 3 أشهر في حالة مرور 3 أشهر على الموعد المحدد فينبغي أن تراجع الطبيب ليقرر تجديد الموعد.

In case of not attending the appointment in the hospital you can renew it in the health center by the medical record staff.

في حالة عدم تمكنك من حضور موعدك بالمستشفى، يمكنك تجديد الموعد عن طريق قسم السجلات بالمركز.

Symbolic fees will be accounted for the non-associated members at BDF Hospital.

سيتم احتساب رسوم معينة لغير المنتسبين لمستشفى قوة دفاع البحرين.

TO BE COMPLETED BY REQUESTING DOCTOR (Feedback to Health Centre)

Diagnosis

Treatment Given / Procedures

Recommendation for Follow-up Care / Medications

Doctor's stamp

Doctor's sign

HC Telephone

Ext.

Date

Figure 3: Referral form Used by Primary Care Doctors in Bahrain

These official documents has to be subjected to regular assessment and audits to assess the quality of clinical care.

### **Specialist Feedback**

The referring process composed of five essential steps:

1. Determining the nature of the problem by both the patient and the referring doctor,
2. Communication of the need and purpose to the specialist,
3. Attention given to the problem by the consultant,
4. Communication of the consultant's findings and recommendations to the referring doctor, and finally
5. Understanding by the patient, the specialist, and the referring doctor of who is taking responsibility for the patient's continuing care<sup>9</sup>.

Step (4) is one of the crucial steps to complete a referral procedure successfully in which the specialist has to communicate back to the referring doctor. The specialist is obliged to supply follow up information which have a great impact on the patient care, hence, insuring continuity and coordination. It is unprofessional not to have any form of feedback. Not only it deprives the primary care doctor from learning but also causes more frustration. If a patient is sent back to the primary care with no information from the specialist, this could cause confusion about the management the patient received or the type of follow up needed. Consequently, the patient will feel that he/she is not adequately being taken care of, which ultimately would affect the patient-doctor relationship<sup>9</sup>. Cummins et al found that follow up response rate was an average of 62%<sup>9</sup>.

Unfortunately, and up to my knowledge, there are no Bahraini studies on the average rate of feedback from specialists to primary care doctors.

### **How to Involve the Patient**

Many physicians believe that the patient can play an important role in the decision-making of referrals. As stated above, patient should receive a good explanation about why he/she is being referred. When feasible, the patient could be given the choice between a government and a private hospital. On many, occasions and as preferred by a considerable number of doctors the patient takes the form to the specialist during the appointment; therefore, avoiding the loss of the form. Giving more responsibility to the patient enhances patient's empowerment<sup>1</sup>. It is also nice to ask the patients about their experiences with the specialist. This will make them feel that the doctor cares about them and will aid the primary care doctor in making the decision of future referrals.

### **What Is New in the Technology of Referral System**

Using the internet can make life easier for many doctors. Emails or internal electronic communication can shorten the process. Some health authorities use electronic referrals forms which can be accessed by doctors and patients<sup>1,7</sup>. Whether this type of technology proves to be better or not when compared to the traditional one further studies are needed.

## Areas for Further Studies

We don't know much on the effectiveness of the referral system in Bahrain. There are no documented studies about the rate of completion of the referral whether by the primary care doctor or the specialists and the rate of patients showing up for the specialist appointment. Is there an association between the patient or the referring doctor characteristics and the completion of the referral process? Should the traditional referral system be replaced with the new electronic system?

## CONCLUSION

**Referrals are considered an essential part of the continuity of patients' care. Optimizing the process is the role of all parties involved starting from the primary care doctor, the patient, the involved clerks, the specialist and ending with the health authority. The primary care service in Bahrain is one of the most active sectors in achieving remarkable improvements in the quality of health care provided to all citizens and residents. Nevertheless, more studies and audits need to be undertaken to assess and improve the referral system.**

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