Primary Care Education Afternoon

January 16th 2012

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Introduction

- QIPP meetings
- 2WR referrals on C&B
- Direct to test for 2WR
  - Upper GI guidelines
  - Colorectal guidelines
    - NPSA alert for bowel preparation
    - Bowel preparation requirements
- Referral pathways
  - Abnormal LFTs
  - IBS symptoms
- Chronic stable conditions follow-up
  - Cirrhosis
  - Inflammatory bowel disease

2WR Upper GI Referrals on Choose & Book

- Referral initiates a 2WW Gastroenterology appointment prior to tests
  - Dysphagia
  - Epigastric mass
  - Recent onset Dyspepsia >55
  - Unintentional weight loss
  - Persistent vomiting
  - IDA with no obvious cause.
  - Jaundice (But please consider direct hospital admission)

2WR Upper GI Direct to Test

- Same indications
  - (except Jaundice)

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2WR Lower GI referrals on Choose and Book

- Referral initiates a 2WW Gastroenterology appointment prior to tests
  - Persistent PR bleeding without loose stools or anal symptoms> 50 years old
  - PR bleeding & loose/more frequent stools for > 6 weeks
  - Loose/more frequent stool> 6 weeks> 50 years old
  - IDA with no obvious cause(men or post-menopausal women)
  - Right sided abdominal mass or rectal mass

2WR lower GI Direct to Test

- Same indications
- Patient Fitness
  - Fit for Day Case Colonoscopy with home bowel prep
- Contra-indications to bowel preparation
  - Absence of absolute contraindications to bowel preparation
- Concomitant Drugs
  - Confirm patient not taking drugs with adverse effect on safety of bowel preparation or able to stop drugs for required interval.

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2WR lower GI Direct to Test

- NPSA Alert

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- Bowel Preparation Requirements

Microsoft Word Document

Referral pathways

- Abnormal LFTs

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- IBS Symptoms

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- Both embedded in Gastro DOS on C&B

Chronic Stable Conditions Follow-up

- Cirrhosis
  - HCC surveillance
- Inflammatory Bowel disease

Microsoft Word 97 - 2003 Document