

# GP Newsletter

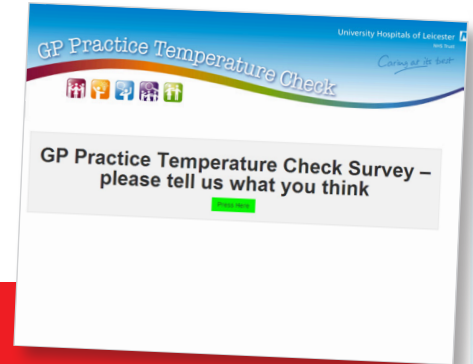
*Caring at its best*



Welcome to the September edition of the GP Newsletter

## Annual Primary Care Temperature Check Survey

Thank you to everyone who has taken the time to complete the annual Primary Care Temperature check survey.



There is still time to complete the survey.  
To access the survey [click here](#)

The opinion of our Primary Care colleagues is valued highly by the Trust and we would like to encourage all practice staff to complete this survey. The survey will close on 30th September and we will report the findings in future editions of the newsletter.

Thank you for your response

Catherine Headley, Head of Services for GPs

## Red Reflex Test in Children - Important

Recently our Paediatric Ophthalmology Team have seen an 8 month old child and have made a diagnosis of Retinoblastoma, which is the commonest cancer of the eye in the paediatric age group. The original referral had come from the GP who noted a squint in her eye in July and sent a routine referral. Unfortunately because of the delay, the cancer has now spread to the nerve at the back of the eye, significantly increasing her risk of mortality. She has been referred urgently to the Retinoblastoma team at Birmingham Children's Hospital where she will be seen and treated.

A simple **red reflex test** done in July by the GP would have avoided this delay altogether. It is a test that GPs do in all newborn babies at 6 weeks of birth. The team would like to strongly encourage all GPs to undertake this test in children with a new onset of squint particularly in those under 3 years of age.

**Dr Anamika Tandon,**  
Paediatric Ophthalmologist

### Checking for the Red Flex in Children

Examination of pupil reflections, also known as the red reflex test, can reveal problems in the cornea, lens and sometimes the vitreous, and should be used at all assessments in young children.

It is essential to test the red reflex after birth, at the age of six weeks and also during routine consultations or when parents are concerned about the child's vision or the appearance of his or her eyes.

The test can alert us to large lesions in the retina. It cannot be used, however, to identify causes of poor vision related to retinal dystrophy or optic atrophy. For this, appropriate referral is needed.

### Method

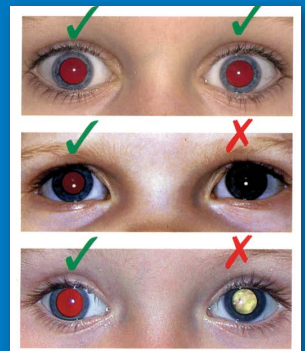
Sit in front of the child and parent at about arm's length. Set the ophthalmoscope to around +2 (green or black) and focus on the parent's eyes to show that the test is non-invasive and recognition of the normal red reflex in that particular ethnic group. Then focus on the child's face and

encourage the child to look at the light. Focus on the red reflex within the pupil. If a white rather than a red reflex is seen an urgent referral should then be sent so the patient is seen within 2 weeks – a faxed referral for urgent attention of Paediatric Ophthalmology would also be appropriate – 0116 258 5927

### Outcome

Please follow the link below which shows examples of abnormal reflexes - [http://www.childrenseyesinlondon.com/poster\\_red\\_reflex\\_print.pdf](http://www.childrenseyesinlondon.com/poster_red_reflex_print.pdf)

Dr Anamika Tandon, Paediatric Ophthalmology Consultant filmed a GP Vodcast which mentions this test – [please view this video here](#)



If you have any queries regarding the **red reflex test**, or have concerns about a patient, please do not hesitate to contact the **Ophthalmology Department on 0116 258 6198.**

# Pancreatic Cancer app

A new cancer information app called '**My Pancreas**' was launched on the 1st September by the Leicester General Hospital Hepato-Pancreato-Biliary (HPB) Unit & Design Agency AGF Studio and will be made available for the public on Apple's app store for iPhone and iPad.



A dedicated information guide on pancreatic cancer, the App is amongst the first of its kind to be released in the UK. It has been designed to guide a patient through their journey from initial referral to treatment, how to manage symptoms and where to find further help and support. The Leicester General Hepato-Pancreato-Biliary team, led by Clinical Director and Consultant Surgeon Giuseppe Garcea, Professor Ashley Dennison and Lead HPB nurse specialist Cris Pollard, have been working on the project since February 2015.

The team initially approached De Montfort University to take part in their annual "hackathon" event. The experience enabled the HPB department to approach charitable organisations with a clearer plan and proof of concept.



For more information on the app please contact the HPB Unit [www.hpbleicester.com](http://www.hpbleicester.com) or Mr Giuseppe Garcea on [Giuseppe.garcea@uhl-tr.nhs.uk](mailto:Giuseppe.garcea@uhl-tr.nhs.uk)

## New Medical Examiner roles

As part of the Learning Lessons work last year we have created a new Medical Examiner role which has been introduced at the Royal initially and at the General and Glenfield planned to start in the Autumn.

This role is important to help understand why patients die whilst in hospital and to give feedback to families.

So far over 200 deaths have been screened by the Medical Examiners during July and first part of August - of those 59 have been submitted for full review by the Speciality Morbidity and Mortality (M&M) Lead.

As part of their roles, the new Medical Examiners have completed the national training programme and as a result they are having a positive impact on the quality of death certification through education and discussion with clinical staff.

Early feedback from bereaved relatives has been positive. They appreciate being able to discuss any questions with the Medical Examiner and have also been given an opportunity to contribute to the mortality screening process by advising of any concerns they have had about the patient's care.

The Medical Examiners are working closely with the Bereavement Services Office, Mortuary Team, Coroner and Registrars' office and they also have good links with the Bereavement Support Nurse, whose role is to provide support to all bereaved families and to sign post to relevant services if unmet bereavement needs are identified.



The Lead Medical Examiner for the Trust is **Professor Peter Furness**, Consultant Histopathologist and Director of Professional Standards at the Royal College of Pathologists.

Please contact him using [peter.furness@uhl-tr.nhs.uk](mailto:peter.furness@uhl-tr.nhs.uk) if you would like further information on the role of the Medical Examiners.



# Outpatient Botox for Chronic Fissure in Ano: A new service at UHL

We are pleased to announce the start of a new pilot service **Anal Botox Clinic** at UHL from September 2016.

**This pilot has been commissioned for a year and is a service for patients with a chronic fissure in ano who have failed medical management.**

The clinic will offer Botox injection under local anaesthetic in suitable patients. Previously these patients would undergo an examination under anaesthetic and injection Botox in theatre as a day case.

## Which patients with a chronic fissure in ano will benefit from this service?

- Patients over 19 years who have had two or more courses of topical treatment (Glyceryl trinitrate - Rectogesic) or (Diltiazem - Anoheal) with inadequate response (continuing pain and bleeding associated with defecation).
- Patients who are unable to tolerate topical treatment due to headaches or skin reactions.

## How will these patients be managed?

- These patients will be sent out an appointment with detailed patient information about what to expect in clinic. They are then seen in clinic and will receive their Botox injection on the day if there are no contraindications to Botox therapy.
- They will be followed up after 4 weeks to assess response to treatment.

## What are the benefits of the service?

- The service will offer a one stop service and improve the patient experience.
- There are savings for the commissioners with the treatment being offered in clinic rather than in ambulatory theatre which will also free up theatre capacity for other procedures.

## How will the service be monitored?

- The patient outcomes and experience will be assessed through questionnaires and clinic/ telephone review and presented to the commissioners. A cost effectiveness evaluation of the intervention will also be undertaken.

## How do I refer patients in to the service?

- You can fax referrals to the Colorectal service at LGH on **0116 258 8164** or mail them for the attention of "ANAL BOTOX CLINIC"
- You can also obtain guidance on the Choose and Book referral portal under the tab (CAB guidance only) for lower GI referrals.

**Mr Sanjay Chaudhri**, Consultant Colorectal and General Surgeon



# New coloured bag packaging for Special Haematology

In order to help process samples for Special Haematology patients the Pathology team are introducing a new purple coloured bag.

**This new bag will help identify samples easily and direct them to the testing laboratory in a timely manner.**

The bags are re-usable and surgeries will be supplied with a number of bags via the pathology van drivers in the same way the current U&E bags are supplied.

Practices will also be supplied with an updated coloured bag system poster for display in the phlebotomy and reception areas for easy reference.

As soon as practices receive the purple bags they can be used, placing in them samples for Special Haematology / Sickle Cell and Thalassemia screening only.

Should you need any further information regarding this change, or if you would like additional coloured bag system posters you can contact;

**Paul Staples or Jason Blake**  
Specimen Reception  
Mangers UHL

Telephone (0116) 258 6570

[Paul.staples@uhl-tr.nhs.uk](mailto:Paul.staples@uhl-tr.nhs.uk)

[Jason.c.blake@uhl-tr.nhs.uk](mailto:Jason.c.blake@uhl-tr.nhs.uk)

**Keith Chambers**

Senior Biomedical Scientist  
in Special Haematology  
Telephone (0116) 258 7531

[Keith.chambers@uhl-tr.nhs.uk](mailto:Keith.chambers@uhl-tr.nhs.uk)

## Coloured bag system for sending samples to Pathology

### Red outer bag

Urgent chem and haem tests only e.g. INR, Malaria, BHCG, Digoxin, Chemo patients, Temporal Arthritis, Downs screening, transfusion bloods

### Green outer bag

CHEMISTRY and HAEMATOLOGY  
Blood samples only.  
No U&E / bone requests  
Non-blood into White bag.

### Pink / white outer bag

IMMUNOLOGY only

### Green and red U&E and bone bag

Chemistry and Haematology samples that include U&E and Bone requests MUST be placed in this bag.

### Blue outer bag

MICROBIOLOGY AND VIROLOGY  
Including urgent Microbiology and Virology requests

### Yellow outer bag

HISTOLOGY and CYTOLOGY requests  
e.g. Minor Ops, Cervical Smears

### White or black outer bag

Non-blood samples for Chemistry testing  
e.g. Urine Microalbumin, urine drug screens

### Purple outer bag

SPECIAL HAEMATOLOGY  
Haemoglobinopathy screening  
(sickle cell & thalassaemia)



**Pathology Open Evening - see back page**

# Attaching Referral Letters to E-Referrals

Further to July's article, UHL do recognise that national guidelines suggest that referral letters for 2ww and urgent referrals should be attached to ERS within one day and referral letters for routine referrals should be attached within 3 days. This was recently discussed between UHL and local CCGs.

Although the majority of referral letters are added within these timescales, it is also apparent that many referral letters are added late, and many are not added at all. Non-compliance with the guidelines will be monitored and practices who are regularly



not attaching referral letters in a timely manner will be contacted by your local CCG lead. Please ensure that you are reviewing your "Missing Referral Letters" work-list regularly and address any referrals with outstanding letters.

UHL have changed their "Defer to Provider" process and will not be cancelling requests until day 4, leaving time for referral letters to be added to ERS.

**Helen Cave**, Deputy Head of Performance for Outpatients and E-Referrals at UHL

**Sharon Rose**, Locality Lead Manager, East Leicester & Rutland CCG

**Jennie Caukwell**, Delivery Manager, West Leicester CCG

**Clare Sherman**, Senior Strategy & Implementation Manager, Leicester City CCG

## Advice and Guidance

The following services are all available on the NHS E-Referral Service (formerly Choose and Book) for Advice and Guidance. Instructions on how to use the service can be found here:

<http://www.leicestershospitals.nhs.uk/professionals/gp-referrals/nhs-e-referral-service/>

Service Name	Specialty
Colorectal Service Clinic - Colorectal Surgery - LGH - RWE	Colorectal
2ww Cancer Lower GI-UHL-must book at time of referral. Patient must not attend this apt-2ww-GH-RWE	Colorectal
Adult General Dermatology Service - Dermatology - LRI - RWE	Dermatology
Adult General Surgery Service Clinic - General Surgery - LRI - RWE	General Surgery
Adult Non-Inguinal Hernia Clinic - Generalised Surgery - LRI - RWE	General Surgery
General Haematology - Clinical Haematology - LRI - RWE	Haematology
Haemostatic (bleeding) + Thrombotic (Adult + Paed) - Clin Haem - LRI - RWE	Haematology
Adult General Hepatology Service - Hepatology(Medical non surgical) - LRI - RWE	Hepatology
Hepatobiliary & Pancreatic Specialised Surgery-H&P-LGH-RWE	Hepatology & Pancreatic
General Nephrology Service - Nephrology - LGH - RWE	Nephrology
Corneal Service - Ophthalmology - LRI - RWE	Ophthalmology
Eye Lid Service (Adult) - Ophthalmology - LRI - RWE	Ophthalmology
General Eye Clinic Service (Adult) - Ophthalmology - LRI - RWE	Ophthalmology
Glaucoma Service - Ophthalmology - LRI - RWE	Ophthalmology
Macular and Retinal Vascular Disease Service - Ophthalmology - LRI - RWE	Ophthalmology
Orbital and Lacrimal Service (Adult) - Ophthalmology - LRI - RWE	Ophthalmology
Paediatric Ophthalmology (General Service) Orthoptic & Optometry - Ophthalmology - LRI - RWE	Ophthalmology



### The "Rectal Bleed" service has moved!

**Service name:**

**"Rectal Bleed Service (PATIENT MUST NOT ATTEND THIS APPOINTMENT) - Diagnostic Endoscopy - LRI - RWE"**

This service is now located under the ERS specialty of Diagnostic Endoscopy. Patients must not attend, as bookings are not into actual appointment. The majority of referrals for this condition require further investigation and may not need to be seen in a consultant clinic. Once the referral letter has been clinically triaged, the patient will be contacted with details of what needs to happen next.

**Helen Cave**, Deputy Head of Performance for Outpatients and E-Referral Service **Contact - [helen.cave@uhl-tr.nhs.uk](mailto:helen.cave@uhl-tr.nhs.uk)**

## Andrology Service for GPs - Refer and Book via NHS E-Referral Service

This NHS service is offered to patients registered with a GP within Leicester, Leicestershire and Rutland and is located at the Andrology Laboratory at the Leicester Fertility Centre, based at the Leicester Royal Infirmary.

The service provides a diagnostic analysis and information service for male patients about their semen (sperm) in accordance with the 2010 World Health Organisation Guidelines.

This service is only for patients who are actively trying to conceive (have a baby).

To enable patients to arrange a convenient

time to bring in their sample, referral and booking is now available via the NHS E-Referral Service. The Service is called **"Semen Analysis - Gynaecology - LRI - RWE"**. This will also provide a better experience for the patient by having a dedicated time-slot, rather than several patients attending at the same time.

GPs will still need to fill in a request form

(electronically), and give this to the patient, as currently. Samples without a request form will not be tested and will be discarded.

Anybody wishing to have a private semen analysis can do so by contacting the **Leicester Fertility Centre on 0116 258 5922** and booking an appointment, there is a small cost for this service.

### Where can I find more information?

You can log on to:  
**[www.leicesterfertilitycentre.org.uk](http://www.leicesterfertilitycentre.org.uk)**

You can call:  
**0116 258 5922**



**Leicester Fertility Centre**  
*Caring at its best*

# GP Education & Events

SAVE  
THE  
DATE

## Leicestershire Palliative Care Study Group - Breast Cancer

**06 October 2016**

9:00am - 3:30pm

Course Fee: £50 inc Lunch

**Venue:**

Leicester Racecourse

**Contact:**

**Karen.mann@uhl-tr.nhs.uk**

0116 258 5021

**Presenters / Presentations include:**

- Why has life expectancy improved?  
**Professor Samreen Ahmed**
- Palliative Care for Advanced Cancer of the Breast  
**Dr David Miodrag**
- Breast Cancer in the media: Fact or Fiction?  
**Dr Jillian Wall**
- Management of recurrent carcinoma of the Breast  
**Dr Joey Wood**
- Psycho-Social Sequelae of Breast Cancer
- Breast Screening Programme

## Joint Injection Course

**08 October 2016**

08:30am - 1:30pm

Cost: £75 (including refreshments and brunch)

**Venue:**

Leicester General Hospital

**Contact:**

**nichola.coleman@uhl-tr.nhs.uk**

0116 256 3016

**Course Description:**

- Hands on course for GPs which will cover Knee, Shoulder, Elbow, Hand, Wrist, Foot and Ankle and Trochanteric Bursitis.
- Lectures by Orthopaedic Surgeons discussing anatomy, portals, technique and contraindications
- Practical sessions on specific injection sites

For further details or to book a place, please contact: **Nichola Coleman**

## Pathology Open Evening

**10 November 2016**

4:00pm - 6:00pm

**Venue:**

Robert Kilpatrick Clinical Sciences Building, Leicester Royal Infirmary  
Free event

**Contact:**

**rachael.tucker2@nuh.nhs.uk**

0115 924 9924 ext 64002.

**Event description**

Updates on Empath and presentations to include 100,000 Genome project and the impact on patient care, Reticulocyte Haemoglobin Content - a New Way to Test for Iron Deficiency and continuing improvements in Microbiology

Tours of the Lab available at 6:00pm (optional but must be pre-booked)

This event is open to all Primary Care staff both clinical and administrative.

To reserve your place, please contact: **Rachael Tucker**



If you would like more information about any articles in the newsletter or have suggestions for future editions, please do get in touch.

**Catherine Headley**

0116 258 8598

07931 206 247

**UHLGPServices@uhl-tr.nhs.uk**

## And finally...

**For general information** such as referring to us, GP education and previous editions of the GP newsletter, you can find it all (home or at work) by clicking here:

**[www.leicestershospitals.nhs.uk/professionals/](http://www.leicestershospitals.nhs.uk/professionals/)**

