

GP Newsletter

Caring at its best



Welcome to the June edition of the GP Newsletter

Abdominal Aortic Aneurysm (AAA) Screening

Around 80% of people with a rupture die before they reach hospital or don't survive emergency surgery.

Screening through the AAA Service can detect Abdominal Aortic Aneurysm early leading to treatment which is safe and effective and the aneurysm is curable.

The screening test for AAA is a simple ultrasound scan of the abdomen that usually takes about 10-15 minutes. The specialist nurse screener gives the result straight away and results are sent to the GP.



The measurement of the aorta obtained at a man's screening appointment determines the pathway:

- **Normal/no AAA** (less than 3 cm) – discharged from the programme.
- **Small AAA** (3 cm to 4.4 cm) – added to annual surveillance programme.
- **Medium AAA** (4.5 cm to 5.4 cm) – added to 3-monthly surveillance programme.
- **Large AAA** (5.5 cm or above) – referral to the local vascular service.

Clinics are held in the Community at GP Surgeries for the convenience of patients. Men at age 65 are automatically entered into the screening programme and receive an invitation through the post.

Key Risk factors

1. **Age and being a man** - 95% of ruptured AAA occurs in men over 65, this condition is six times more common in men than women.
2. **Smoking**
3. **High blood pressure**
4. **Family history** (first degree relatives).

Self-Referral

Men who are older than 65, and who have not previously been screened or treated for an abdominal aortic aneurysm, can self-refer to the screening office on 0116 258 6820

Research has demonstrated that offering men ultrasound screening in their 65th year could reduce the rate of pre-mature death from ruptured AAA by up to 50%.

AAA Screening could save your patient's life.

Please encourage your patients to attend the screening appointments or to self-refer if they fall outside the screening age group.

For patients who are aged less than 65 or who are female please refer to the Vascular Service through ERS.

For any enquiries please contact Annette Olalobo, AAA Screening Programme Manager **0116 258 6820** or email annette.olalobo@uhl-tr.nhs.uk

INFORMATION GOVERNANCE

We are aware of a number of instances where Information Governance Requirements are being breached by Practices. These breaches involve the accessing and viewing of information that the Trust controls, primarily records of Practice staff members, by other staff. This is accomplished by the deliberate changing of personal details in order to gain access.



These actions are against the Law.



We have systems in place to detect these changes and we are highlighting these breaches to Senior Management within the Trust and at the

CCGs. We are following up several breaches currently and we will report all instances where we feel that Confidentiality and Information Governance are not being maintained. As Data Controllers, we are required to report these breaches and we have

options to escalate to national bodies should this become necessary.

Please can we remind colleagues that the accessing of records and information in this way is not acceptable in any circumstances and we will ensure that breaches of this nature are addressed.

MRI Results

Our MRI booking team are receiving a number of calls from patients who have been told by their GP / GP Practice to ring to request their results.

Please be aware that MRI Results, together with all other Imaging, will be reported directly to the requesting GP and that diagnostics of this nature need at least 2 weeks following the scan to be reported and the results returned to the GP.

Patients will receive results via the requesting GP only and will not be given results directly over the phone, please do not advise patients to ring the booking team for results. There is an agreed and established process for reporting and for patient safety this needs to be followed. If the report has significant findings it will be communicated ASAP to the referrer. We appreciate your cooperation in this matter but if you have any reporting queries please e-mail the imaging escalations mailbox, ImagingEscalations@uhl-tr.nhs.uk

Helen Lang
Superintendent Radiographer



Changes in Glucose Tolerance Testing in Pregnancy

There have been recent changes to the Oral glucose tolerance test in pregnancy.

Traditionally, Lucozade has been used as the source of glucose. Due to the recent government legislation regarding sugar content in drinks, Lucozade has decreased the carbohydrate concentration from 17g/100ml to 8.9g/100ml. For the purpose of using Lucozade for oral glucose tolerance tests in pregnancy, this would result in the women having to drink 850mls of Lucozade. This would be difficult to tolerate and therefore another preparation has been identified.

UHL will now use a pre-prepared pouch of RapiLOSE gel. This contains the 75g glucose required. The instructions for the test are pre-printed on the pouch. The pouch can be stored at room temperature and has a long shelf life.

Women who require a glucose tolerance test in pregnancy will be identified at the booking visit with the community midwife. At the 15 week appointment, the glucose tolerance test will be booked for between 24-26 weeks gestation and the woman will be given a pouch of RapiLOSE to be used.

Stocks of RapiLOSE will be held by community midwives and antenatal clinics. I would like to take this opportunity to stress the importance of adhering fully to the protocol for the oral glucose tolerance test. In particular women should remain seated after drinking the glucose until the two hour blood sample has been taken.



If you have any queries regarding this please contact members of the UHL Diabetic antenatal team:

Diane.todd@uhl-tr.nhs.uk

Tina.evans@uhl-tr.nhs.uk

Helena.j.maybury@uhl-tr.nhs.uk

Nichola.ling@uhl-tr.nhs.uk

Rob.gregory@uhl-tr.nhs.uk

Di Todd, Diabetic Specialist Midwife

Tina Evans, Diabetic Specialist Midwife

Helena Maybury, Consultant Obstetrician

Nichola Ling, Consultant Obstetrician

Rob Gregory, Consultant Diabetologist

GP Education & Events

An Orthopaedics Guide for Today's GP

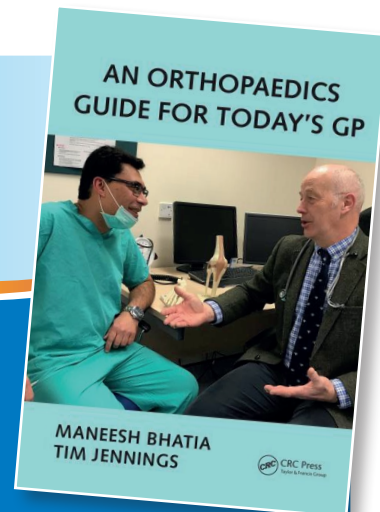
Maneesh Bhatia, Tim Jennings

"An Orthopaedics Guide for today's GP" is a valuable resource for GPs to help them deal with all Orthopaedics issues.

It has lots of coloured illustrations & is a simple, up to date, practical guide which deals with the entire spectrum of Musculoskeletal problems including Paediatric Orthopaedics, Foot & Ankle, Hand & Wrist, Elbow, Shoulder, Spine, Hip, Knee, Lumps & Bumps, Rheumatology, Injection techniques & Physiotherapy.

The authors are a mix of Orthopaedics consultants & GPs who are experts in their fields & heavily involved in education. Prof Nigel Mathers, Honorary secretary of RCGP has reviewed this book, written the foreword and has endorsed this book on behalf of the Royal College of General Practitioners.

This is an important reach-for guide to assist GPs with easy diagnosis and to provide clear direction on next recommended steps as well as a useful exam prep aid for the common MSK cases that occur in the CSA. This book, written by Mr Bhatia and with the involvement of Leicester consultants & GPs, was released on 16 June 2017.



Joint Injection Course

1 July 2017

8:30am - 1:30pm

Leicester Marriott Hotel –

Grove Park LE19 1SW

Cost £100 per person

Contact:

Nichola Coleman

0116 256 3016 or

Nichola.Coleman@uhl-tr.nhs.uk

Course Description:

- Hands on Course for the GPs to cover Knee, Shoulder, Elbow, Hand, Wrist, Foot and Ankle and Trochanteric Bursitis.
- In the first half of the morning there will be lectures by Orthopaedics Consultants to discuss anatomy, portals, technique and contraindications.
- After the break, participants will be split into six groups. These groups will visit the six stations in rotation (Shoulder, Elbow, Hand/Wrist, knee, Foot/Ankle, Trochanteric Bursa) where the consultant in charge will help them to practice the injection skills on feedback models.

Leicestershire Palliative Care Group Study Day: Haematological Disorders

5 October 2017

9:00am - 4:30pm

LOROS

Cost £50 per person

Contact:

Karen Mann

0116 258 7512 or

karen.mann@uhl-tr.nhs.uk

- Leukaemia, Transfusion-dependency & Alternatives at the End of Life: Dr Kate Hodgson, Consultant Haematologist
- Myeloma: Dr Linda Barton, Consultant Haematologist
- Palliative Care for Patients with Haematological Malignancies: Dr Samuel Krauze, spr in Palliative Medicine
- Venous Thrombosis: Dr Richard Gooding, Consultant Haematologist
- Abnormal Blood Results - Who should I call?
- The Role of the CNS in supporting patients

CPD Points will be available



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/

