

PHYSICIAN ASSOCIATES IN GENERAL PRACTICE



PA'S IN GENERAL PRACTICE

- Clinically effective
- Complementary
- Cost effective
- Well received by patients and colleagues



WHY?

- Broad knowledge base (best fit with PA role!)
- Flexibility of work
- Long-term PA-patient relationships
- Holistic care
- Teamwork
- Teaching & Research



WHY?

Patients (!)

- Mixture of sick and well
 - Wide age range
-
- **Frontline care**
 - Clinical acumen – history and exam
 - Huge range of presentations
 - Lots of face-to-face contact



BARRIERS

- **Relatively new role**
 - understanding
- **Regulation**
 - Prescribing
 - Ionising radiation



WHAT WE DO

- Patient consultations - same day acute illness and booked routine appointments
- Telephone triage
- Residential, nursing and home visits
- Managing chronic conditions lists (e.g. COPD or diabetes patients)
- Running clinics (e.g. sexual health, family planning or minor surgery)
- Reviewing, analysing and actioning diagnostic test results
- Meet clinical targets (with team)
- Providing health/disease promotion and prevention advice for patients
- Co-ordinating research activity



TYPICAL DAY?

- **Within a day I can:**
 - Carry out a six week baby check
 - Admit a patient with diverticulitis
 - Inject a patient's arthritic joint
 - Provide counselling for a depressed patient
 - Help a disabled patient make a hospital appointment
 - Provide end-of-life care and advice to a dying patient and their family
- **There always seems to be new variations on the theme** - symptoms peculiar to each individual patient that need untangling and decoding – **it's fascinating!**



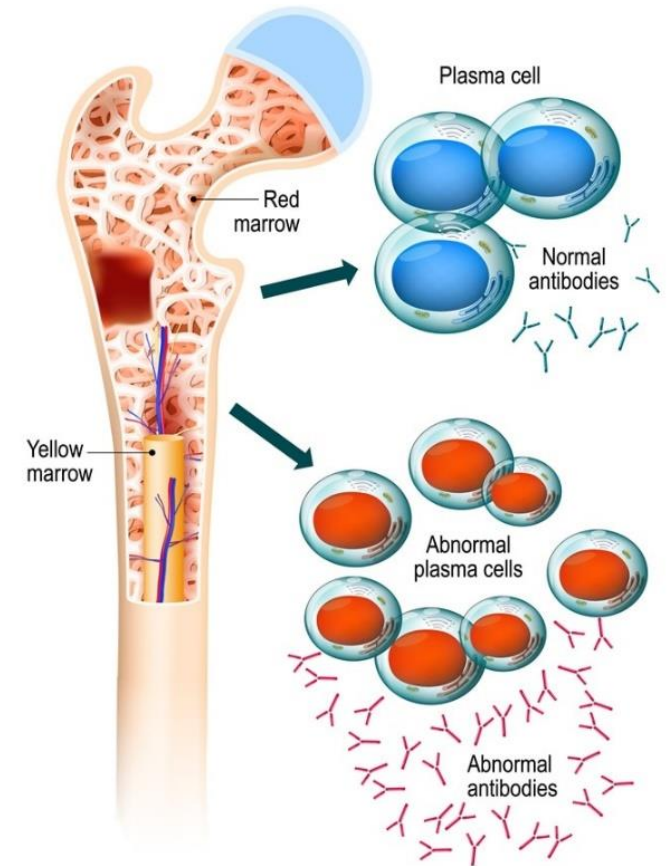
KATHLEEN*

- **90 year old**

- Weight gain x four months. No pain; energy & appetite unchanged
- Abdo exam: ascites
- Bloods = raised CA125; 2WW referral for suspected gynae malignancy

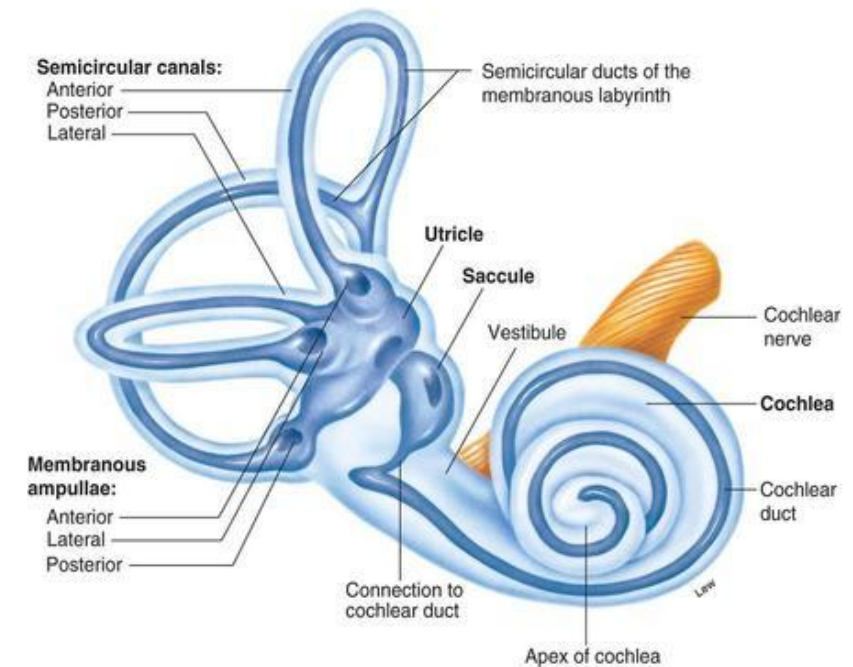
- **But:**

- Hb 72 g/L; hugely raised free Lambda, abnormal Kappa/Lambda ratio = **multiple myeloma**
- Further discussion – chose palliative care, died peacefully at home.



SARAH*

- **50 year old, previously active.**
 - Developed chronic vertigo. Local ENT dx: Meniere's
 - Very disabled – required full-time carer
 - Symptoms \neq diagnosis; referred to Guy's Balance Clinic
 - Multiple appointments: **unspecified vestibular disorder.**
 - Vestibular rehab: excellent rehab/recovery
 - Regained **full function** after a year of treatment



JESSICA*

- **Jessica: 38/40 wks pregnant**
 - Reduced movements; CTG – poor variability
 - Emergency caesarian: APGARS 6 and 8, resus needed
 - 10 day SCBU – **neonatal encephalopathy**
 - Normal growth and development - discharged



ESTHER*

- **13 year old - vomiting and pain**
 - Admitted x3 for rehydration
 - Investigations normal
 - Gynae, paed, paed surgical r/v
 - No cause found
 - Ongoing low-level pain ? cause

Right		Left
Gallstones Stomach Ulcer Pancreatitis	Stomach Ulcer Heartburn/ Indigestion Pancreatitis, Gallstones Epigastric hernia	Stomach Ulcer Duodenal Ulcer Biliary Colic Pancreatitis
Kidney stones Urine Infection Constipation Lumbar hernia	Pancreatitis Early Appendicitis Stomach Ulcer Inflammatory Bowel Small bowel Umbilical hernia	Kidney Stones Diverticular Disease Constipation Inflammatory bowel disease
Appendicitis Constipation Pelvic Pain (Gynae) Groin Pain (Inguinal Hernia)	Urine infection Appendicitis Diverticular disease Inflammatory bowel Pelvic pain (Gynae)	Diverticular Disease Pelvic pain (Gynae) Groin Pain (Inguinal Hernia)

dr.aneesh



JOB REQUIREMENTS

- **Sell yourself:**
 - Enthusiasm
 - Commitment
 - Stability
 - Willingness to learn
- **Questions:**
 - Supervision
 - CPD
 - Indemnity (group?)
 - Salary
- **Future:**
 - Registration: prescribing, ionising radiation
 - PA's as a practice partner?



CONTACT

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