

# TRACKING THE REFERRAL TIME TAKEN BY DOCTORS TO VISIT THE PATIENTS IN A TERTIARY CARE CENTRE OF METROPOLITAN CITIES



**MAX SUPER SPECIALITY HOSPITAL,  
SAKET**

## 1 OBJECTIVES

To Track the referral time taken by the doctors to visit the patient & provide care to the patient at right time at Max Hospital, Saket.



To re-design the referral process at Max Hospital, Saket.



To identify problems in existing Referral process

## 2 METHODOLOGY

**Type of study :** Analytical cross-sectional

**Study population :** Referral Doctors at Max Super Speciality Hospital, Saket, Delhi

**Study area**–6<sup>th</sup> Floor, West wing, Nephrology Department & Medical ICU Max Super Speciality Hospital, Saket, Delhi

**Data collection**–Primary and Quantitative using Referral Index given by the Hospital .

|    | INDEX                           |                             |
|----|---------------------------------|-----------------------------|
| A1 | Referred by Senior consultant   | To be seen within 1 Hour    |
| A2 | Referred by Resident Doctor     | To be seen within 1-2 Hours |
| B1 | Referred by Senior consultant   | To be seen within 4 hours   |
| B2 | Referred by Resident Doctor     | To be seen within 4-6 hours |
| C  | Referred by The Junior Resident | To be seen within 24 hours  |

**Data entry**- Manually using MS- Excel

**Data Analysis**- Using bar charts, pie charts in Microsoft Excel

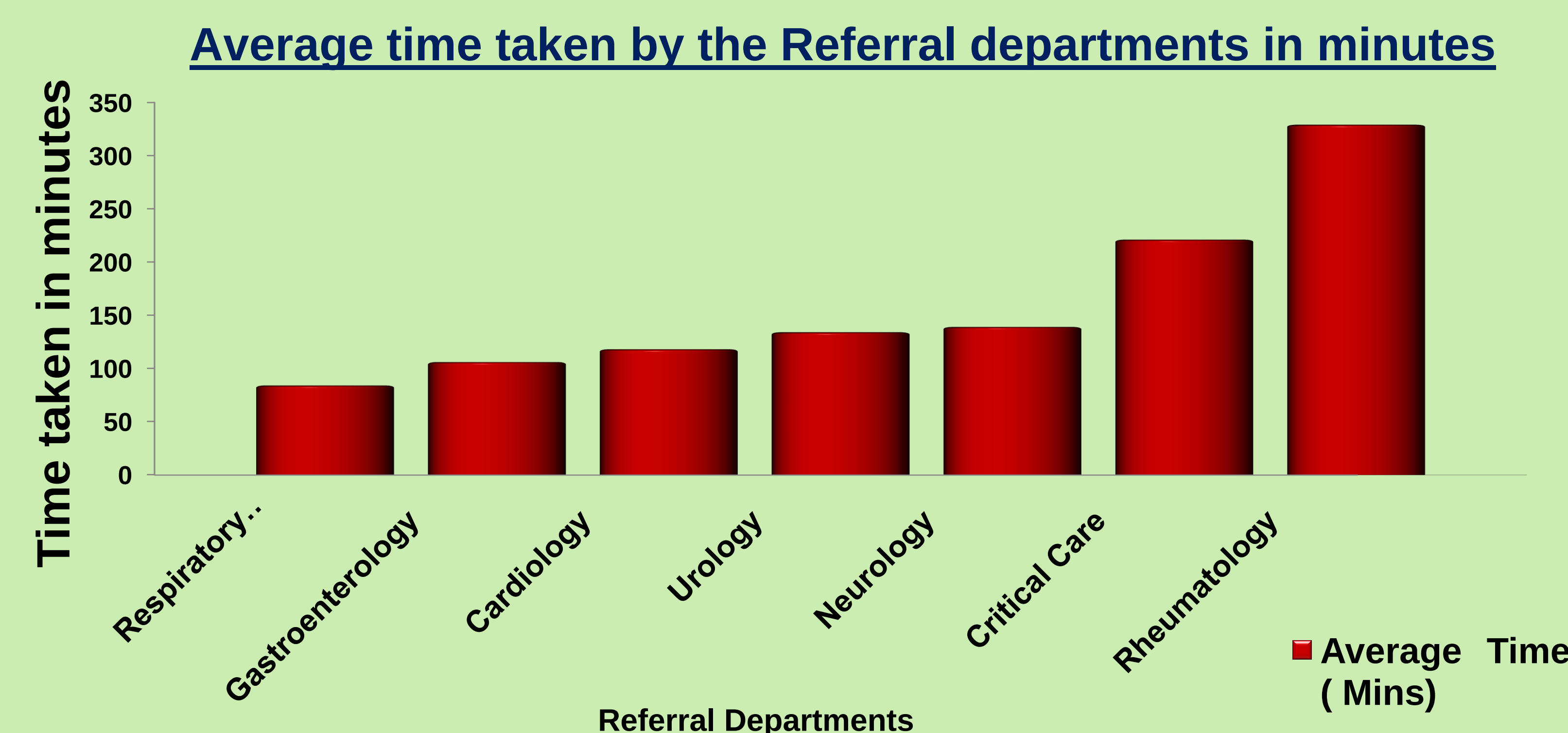
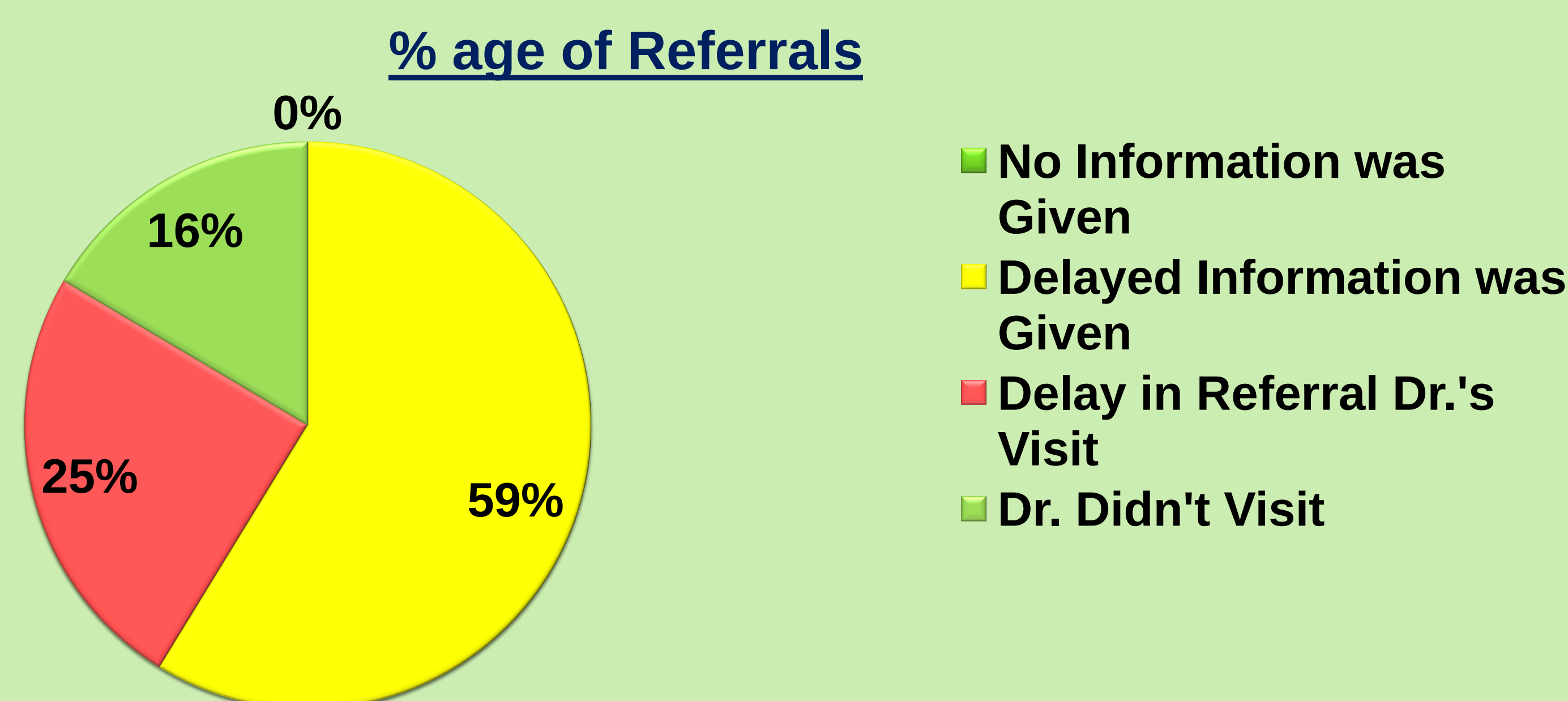
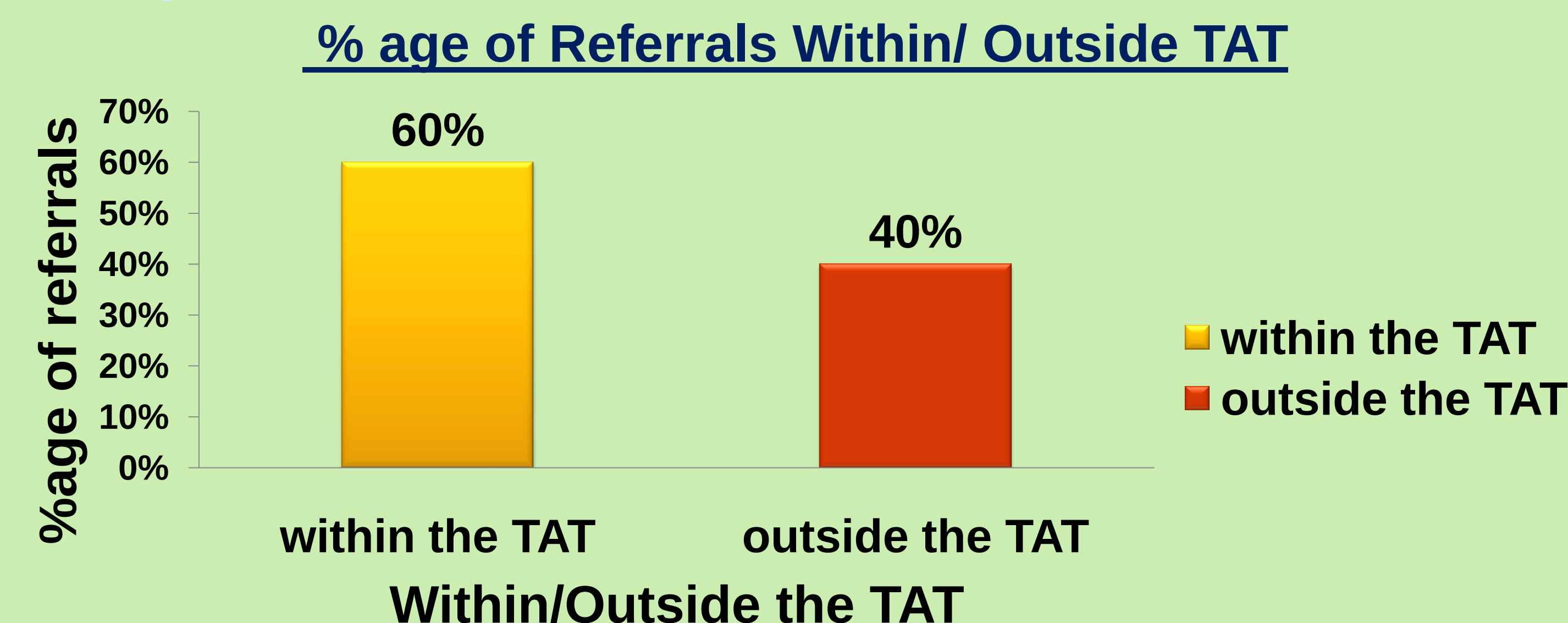
**Duration of Study**– 3 Weeks (April- May'16)

**Technique**– Direct Observation of Operations

**Sample size** – 100 Patients

**Sampling technique**- Consecutive Non probability sampling

## 3 OBSERVATIONS



## 4 RESULTS

- 60% of the Referral doctors visited the patients within Turn Around Time whereas 40% of the Referral doctors didn't visit the patients at the right time.
- The major reason for the delay in visiting of Referral Doctor is the Delay in giving the information to the Referral Doctor.
- Nurses were unaware of what was advised by the referral doctors until the doctor puts the notes in the CPRS.
- At times, Poor Communication was observed between the PCP & Nursing Practitioner
- A re-designed referral process has been made after tracking the flaws in the current Referral system.

## 5 RE-DESIGNED REFERRAL PROCESS

- A new Referral System should include the system of categorizing the Patient's referral & should be implemented depending upon the current health condition of the patient.
- The proposed categorization should be –

| Priority Level | Should be referred by                          | To be seen within |
|----------------|------------------------------------------------|-------------------|
| A1             | Senior Consultant/ Consultant                  | 1 hour            |
| A2             | Senior Consultant/ Consultant/ Resident Doctor | 1-2 Hours         |
| B1             | Resident Doctor                                | 4 Hours           |
| B2             | Nursing Practitioner                           | 4-6 Hours         |
| C              | Nursing Practitioner/ Staff Nurse              | 24 Hours          |

- Referral information to the doctors should be provided within 10 minutes of seeking the referral that should include priority level of the case.
- A separate "Referral Sheet" should be in the patient's file , it should have Doctor's name.
- After the visit, the referral doctor should send a confirmation text message to the concerned doctor who sought for referral.