

A day in the life of.....the Duty Doctor at Church Street Practice

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| Patients seen on day: 32 | | |
| Male 14 | | |
| Female 18 | | |
| Age | <18 | 5 |
| | 18-59 | 15 |
| | 60+ | 12 |

We all take an equal share of being the duty doctor. We divide the day into two, so that there is one duty doctor on call from 8.00am to 1.00pm, and another doctor from 1.00pm to 6.30pm.

The duty doctor has fewer pre-booked slots so that there is some space to deal with patients who need to be seen straight away. Emergency phone calls and visits are put through to the duty doctor to deal with. The duty doctor in the morning shares out the visits between the available doctors, and also deals with the results and correspondence for any doctors who are away. Any visits that come in later in the day are taken by the afternoon duty doctor, who then may have urgent visits to do after evening surgery

Because the demands are unpredictable, sometimes being the duty doctor can be very stressful as emergencies come on top of routine booked work. All the doctors are aware that the duty doctor can get snowed under at times, and other doctors will chip in to help out if things get difficult.

The day's work begins at 8am. I complete the computer entries for the visits from yesterday evening and go through 62 blood test results which I enter into patients' records. There are also 20 e-mails to be read and 76 repeat prescriptions to be checked and signed. Six miscellaneous queries also have to be dealt with.

An e-mail is sent to a district nurse asking her to check the blood pressure and take blood tests from a housebound lady. I send a letter to a bereaved husband - one year on from the death of his wife, giving him my best wishes.

At 8.30am I attend a meeting with the other doctors to discuss potential referrals.

At 9.00am the morning surgery begins. I see a young male patient with a wart on his back. He also has a lesion on his lip and I refer him for oral surgery.

My next patient is a 33 year old lady for whom I make an antenatal booking. A midwife will do the follow up.

I next see a gentleman for review after breaking a hip. He needs a sick note and medication repeat. A blood test is taken and he is checked for chronic bronchitis. I refer him to the practice nurse for a spirometry breathing test.

A man aged 53 saw the Health Care Assistant for a blood test. She asks me as duty doctor to deal with a skin infection.

The next patient is a man who came to discuss an upper respiratory infection prior to a visit to China.

An elderly lady has itchy legs and is given some cream. She is referred to a practice nurse for a blood test

Next, a lady patient aged 64 requires a sick note for a knee problem.

The last patient this session is a lady who has been involved in a road traffic accident. As a result she has suffered from nerve pain. I prescribe a drug for neuropathic pain.

At 10.30 I reply to telephone messages. There are two requests for sick notes. One is from a lady who is suffering back pain, the other is from a male aged 37 who has a knee injury and is having physiotherapy treatment.

There are 8 queries about medication.

A lady is worried about diarrhoea after foreign travel and there is a call from a 31 year old lady who has dental phobia.

There are two calls from a nursing home. An elderly lady resident has a urinary tract infection. She is prescribed antibiotics but is also experiencing feeding problems. An elderly gentleman resident has a skin irritation. He is prescribed vitamin B12 injections.

There are 7 more medication queries. I write a letter to a patient about their medication I discuss a young child's urinary tract infection with her mother on the phone.

There are 12 further e-mails to deal with.

An oncology nurse from the J.R. requests me to visit a patient.

I then complete an on line questionnaire, and deal with abnormal results.

A female patient, aged 74, with anaemia, discussed her medication and checks.

At 11.30 I see a lady with a urinary tract infection.

The next patient is a man aged 60 with a skin infection. His blood pressure is checked.

I then see an elderly man with a chest infection which is non-resolving to antibiotics. He is referred for an X ray.

More phone calls.

A lady aged 48 has a problem with her medication.

A 60 year old man has a query regarding a hospital letter.

There are 6 e-mails. One is from a practice nurse reporting on a diabetic review.

I now go to reception to sort out the medical student's bookings.

In the surgery I see a 31year old man who has bronchitis and asthma. He is prescribed antibiotics and steroids. He needs to see a practice nurse for smoking cessation and an asthma check.

The next patient is a young man who has a minor knee injury and needs a note for community service.

I then see a 38 year old lady with acne. I prescribe antibiotics.

I now speak on the phone to a journalist at the Oxford Mail in my capacity as Chairman of the Local Medical Committee about a local incentive scheme to manage a £26 million overspend on over capacity at Oxford Radcliffe Hospitals.

Support for a carer is arranged for a 78 year lady who also needs routine repeat blood tests.

At 1.pm I go out on 2 visits to patients.

I visit a lady in Wantage Community Hospital to review her after a fracture of the neck of her femur.

I make a home visit to a lady who has terminal bowel cancer, and is deteriorating. I phoned and asked the district nurse to visit for general nursing care.

At 3 pm. In the surgery a woman, temporary resident aged 31, is seen as an emergency. She has acute urticaria (hives).

I then have to deal with another 2 phone calls. One is concerning an elderly gentleman with a urinary tract infection. I call the pharmacist. The other is from a 60 year old man about a hospital letter. There are 12 more e-mails to deal with.

I then see two more patients. A lady aged 55 with headaches and a man aged 55 with conjunctivitis.

There is an emergency call from a paramedic concerning the unexpected death of a woman at home. I arrange to visit her parents later.

My next patient is a young man complaining of headaches and is a Sexually Transmitted Disease contact.

I then see a 12 year old girl with epigastric (stomach) pains. I prescribe antacid treatment. I then see a hot and grumpy baby of 20 months.

There are 10 e-mails to look at and reply to.

I have a discussion with a Primary Care Mental Health Assistant about a referral.

5.00pm surgery starts with a 25 year old man who is suffering from tiredness and sweats. I refer him to a nurse for blood tests.

A Health Care Assistant and I discuss the use of nicotine patches for a man with cancer.

There are 12 reports and results for computer entry.

My next patient is a 17 year old girl. We have a discussion on sexually transmitted diseases. A 77 year old lady complains of breathlessness. She is referred to a practice nurse for an E.C.G., spirometry and blood tests.

There is a phone call regarding an elderly man who has a headache and fever. I arrange a visit after surgery.

I now see a man of 49. Because of his blood pressure and cholesterol level he may be at risk of cardio vascular disease. I treat his blood pressure and cholesterol.

The next patient, a girl, has a urinary tract infection needing antibiotics. My final surgery consultation is with a 34 year old male diabetic with foot pain.

I phone regarding a 3 year old child with a urinary tract infection about her treatment.

At 6pm I go out on urgent visits. I see the elderly man with headache and fever.

My final visit is to see the bereaved parents of the woman who died unexpectedly today.