

## A day in the life of.....a Practice Nurse at Church Street Practice

Patients seen on day: 25		
Male 13		
Female 12		
Age	<18	4
	18-59	10
	60+	11

The practice nurses worked two shifts, from 9.00 am to 3.00 pm and from 3.30 pm to 7.00 pm (although the nurse working the second shift continued unpaid from 7-8.00 pm as it was a busy shift and there was work to catch up with).

The day began dealing with e-mails, post and up-dating appointments.

On this day there was a diabetic clinic and the nurse had a medical student with her between 9.00 and 11.30 am.

At the diabetic clinic the nurse checks and discusses a variety of factors with each patient. Blood results are checked – levels of sugar and cholesterol, and kidney and liver function. Urine test results are checked – these also monitor changes in kidney function. Medications are reviewed, both oral medication and insulin. Any changes or new medication needed are discussed as are their side effects and the patient's willingness to take the medication. The patient is asked if he/she has been for retinal screening and has had a recent appointment with an optician. The patient's feet are checked for pulses and sensation and the patient is referred to the podiatrist if necessary. Diet, exercise, smoking and alcohol intake are discussed as are weight loss if that is needed. Any questions the patient has are dealt with.

After the appointment the entry made on each patient's notes is e-mailed to their GP with a plan of action. Each week there is a feedback session with one GP to review all diabetic patients seen, discuss any complicated issues, and make medication changes. If the latter are necessary, the nurse phones the patient.

The first patient was seen at 9.10am. Approximately 30 minutes was spent with each patient – the nurse missed her mid-morning coffee break and worked through to 11.50am. She saw 6 patients with diabetes, 4 men and 2 women in the age range 49-75 years. Checks were made on weight, diet, alcohol intake, smoking history and medication. 'Flu jabs were offered to each patient. The nurse needed to follow up four of these patients with their doctor and then phone them back.

During the morning she also dealt with two phone calls with queries about contraception.

The seventh appointment did not arrive which gave the nurse half an hour to take the specimens collected to reception and catch up with e-mails and post. She also checked equipment in the surgery – anaphylaxis, oxygen and catheter equipment, nebulisers, blood glucose monitors, and the crash trolley.

The last appointment of the morning concerned the patient's vaccine history and was followed up in a discussion with another practice nurse.

Lunch was from 12.40 to 12.55!

This was followed by a 15 minute meeting with the Practice Manager to discuss hours and clinics.

Patients seen in the afternoon included a diabetic patient who needed adjustments to medication which involved checking with the patient's doctor. A blood test. A newly diagnosed diabetic patient who was given information about the disease and how to

manage it. A cervical smear. Finally, changing dressings after a minor operation at the hospital.

The last 25 minutes of this shift were spent ordering vaccines, sorting specimens, and reading and dealing with e-mails from the doctors.

During the second shift the practice nurse saw 14 patients, 9 females and 6 males, with an age range of 9 to 79 years. Each appointment was booked for 10 or 20 minutes. There were three travel vaccination appointments, two diabetic patients, four patients with asthma (two of whom were given 'flu jabs which made the appointments over-run), one cervical smear, one patient discussing giving up smoking, two blood tests, and one patient who needed a dressing changed and also had to be seen by a doctor as antibiotics were necessary to deal with an infection.

At 7 pm the nurse made a phone call to a patient with diabetes who is being called every fortnight while adjusting insulin intake. Then from 7 pm she continued working, unpaid, until 8 pm catching up with paperwork, e-mails to doctors and storing blood samples.