

# Clinical Audit On Rheumatology New Patients Clinic In University Hospital Waterford

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## Background

Rheumatology new patient clinics are designed to see referrals from general practice and other hospitals. All referrals are triaged according to clinical urgency. In the rheumatology department of UHW, there are a few possible outcomes after the initial visit-inflammatory arthritis clinic (IAC), review clinic or discharge. The IAC pathway comprises clinic review 6 weeks post diagnosis, seen on the same morning by the rheumatology ANP, physiotherapist and occupational therapist

## Objectives

- To establish the outcomes from the new patient clinic over a 3 month period
- To compare features from the referral letter in patients diagnosed with an inflammatory arthritis and those discharged

## Methods

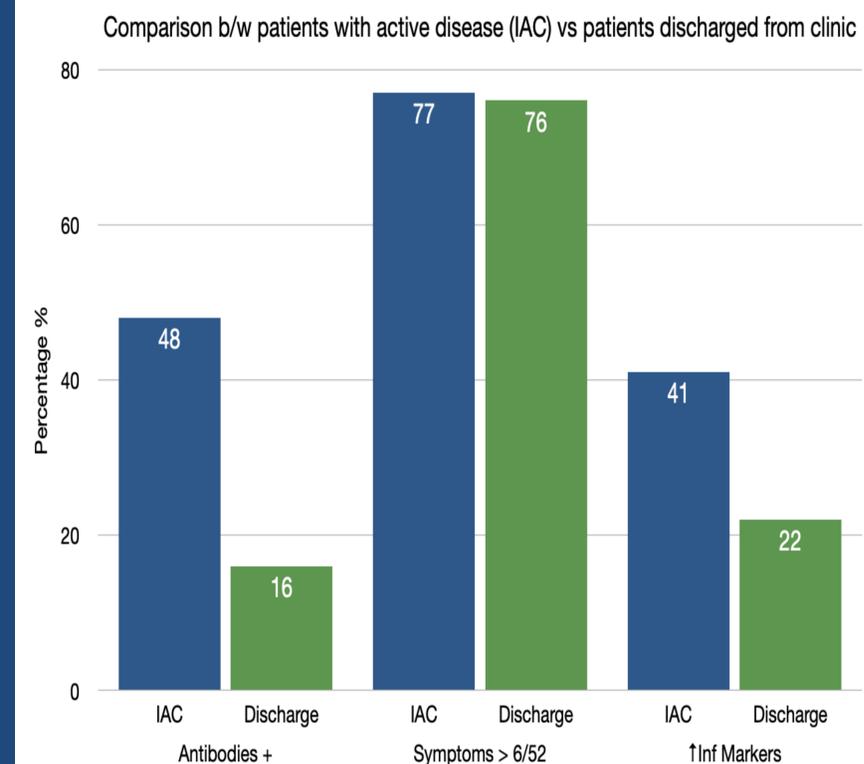
Time of study included new patient rheumatology clinics between Oct and Dec 2019 in UHW . Using the hospital administration system, IMPS, the outcome of the first clinic visit was noted. The group of patients who were entered into the IAC pathway and those discharged were also identified - their initial GP referral letters were studied looking at details

## Results

A total of 64 out of 138 urgent patient appointments for 1 consultant clinic were examined. 5 out of 64 failed to attend and were not included in the analysis. Out of the 59 patients that attended, 29 patients (50%) were found to have a new inflammatory arthritis and were referred to the IAC pathway (Group A). 12 patients (20%) got a review appointment ranging from 4 to 6 month follow up. 18 (30%) of the patients were discharged.(group B)  
 Further comparison was made between groups A and B. In group A, 86% of patient had autoantibody (RF, ANA) testing done by GP prior to referral- 48% of those had positive antibodies. In group B, 72% had antibody testing prior to clinic; only 16% had positive antibodies.  
 The most common joints described in the referral in both groups (Group A 51%, and group B 66%) were joints in hands (MCP, PIP, and DIP). The majority of patients in both groups had symptoms present for more than 6 weeks, 77% in group A and 76% in group B. Inflammatory markers were found to be elevated more in group A (41%). Only 22% of patients had raised inflammatory markers in group B

No Of Patients	Inflammatory Arthritis Clinic (IAC)	Routine Follow up	Discharged
59	29 (50%)	12(20%)	18(30%)

**Figure 1. Outcomes from the new patient clinics**



## Conclusion

Approx 70% of patients seen in the urgent new patient clinic had a significant rheumatological issue which needed follow up (50% urgent and 20% routine follow up). Inflammatory markers are not always reliable due to concomitant treatment/ elevated for other reasons.. Despite the inclusion of antibody results and inflammatory markers in the referral letter, 1 in 3 patients were unnecessarily given urgent appointments, reflecting the need for more accurate ways of screening patients for inflammatory arthritis clinic.