

Practice activity analysis

5. Referrals to specialists

THIS report is based on an analysis of the first 100 proformas received. The recording took place during four weeks of October or November 1977. The doctors participated voluntarily and cannot be considered as a representative sample. The 100 proformas are concerned with 64,986 consultations.

Results

There were 2,755 referrals. For the purpose of this study referrals were limited to those in which a 'new referral' was made and did not include those in which the further opinion of a specialist was sought for a problem about which he had already been consulted. The distribution of referrals expressed in numbers and as rates per 1,000 consultations is described in Grid C in the format used on the retained grid of the proforma.

Twenty-two per cent of all referrals were to surgeons (604 out of 2,755) and this was approximately twice as many as to physicians (276). There were 370 referrals to orthopaedic surgeons, although this includes an unspecified number of referrals occasioned by trauma.

The variation among recorders is given in Table 1, where the 100 doctors are divided into five groups of 20 according to the rates at which referrals were made. Every doctor made at least one referral during the study. Information about doctors who made no referral in specified specialties and modes of referral is shown in Table 2. Using 'medicine' referrals as an example, this table shows that nine doctors made no referral at all, 29 did not refer a patient to a medical outpatient clinic, 89 did not resort to domiciliary consultation, and 34 did not refer for admission.

Mode of referral

Eighty-one per cent of referrals (2,225 out of 2,755, Grid C) were for outpatient consultations, 16 per cent for hospital admission, and three per cent for domi-

Table 1. Total referrals in 5 groups of 20 doctors (rates per 1,000 consultations).

A	B	C	D	E
16.8	30.9	38.0	46	57
98.1				
Minimum rate	Intervening rates			Maximum rate

GRID C. Distribution of referrals (number and rates per 1,000 consultations).

		OP	DC	HA	Total
Dermatology	Number	115	5	1	121
	Rate	1.8	0.1	0.0	1.9
ENT	Number	213	3	1	217
	Rate	3.3	0.0	0.0	3.3
Geriatrics	Number	19	27	21	67
	Rate	0.3	0.4	0.3	1.0
Gynaecology	Number	246	1	25	272
	Rate	3.8	0.0	0.4	4.2
Medicine	Number	148	14	134	296
	Rate	2.3	0.2	2.1	4.6
Obstetrics	Number	203	0	20	223
	Rate	3.1	0.0	0.3	3.4
Ophthalmology	Number	163	2	0	165
	Rate	2.5	0.0	0.0	2.5
Orthopaedics (incl. trauma)	Number	350	2	18	370
	Rate	5.4	0.0	0.3	5.7
Paediatrics	Number	46	0	33	79
	Rate	0.7	0.0	0.5	1.2
Psychiatry	Number	77	15	18	110
	Rate	1.2	0.2	0.3	1.7
Surgery	Number	434	12	158	604
	Rate	6.7	0.2	2.4	9.3
Other	Number	211	10	10	231
	Rate	3.2	0.2	0.2	3.6
Total	Number	2,225	91	439	2,755
	Rate	34.2	1.4	6.8	42.4

OP — Referral to outpatients.

DC — Domiciliary consultation with specialist.

HA — Admission to hospital (under consultant care).

Table 2. Number of recording doctors who did not make any referral by specialty and mode of referral (analysis from 100 doctors reporting).

	Outpatient clinic	Domiciliary consultation	Hospital admission	Total referrals
Dermatology	39	95	99	36
ENT	11	97	99	11
Geriatrics	87	81	82	62
Gynaecology	14	99	80	12
Medicine	29	89	34	9
Obstetrics	26	100	81	20
Ophthalmology	26	98	100	26
Orthopaedics (incl. trauma)	6	98	84	5
Paediatrics	65	100	71	46
Psychiatry	50	83	82	37
Surgery	4	89	36	1
Other	22	93	92	20
Total	0	51	5	0

Table 3. Referral rates (per 1,000 consultations) by numbers of recorded consultations.

Total consultations	< 499	500-699	700+
Recording doctors	22	43	35
Referral rate	51.3*	41.9	40.1
Referral rate for hospital admission (HA)	10.6	6.0	6.3

* $P < 0.05$; Kruskal-Wallis test comparing referral rates among doctors reporting fewer than 499 consultations with the group of doctors reporting 500 to 699 consultations.

ciliary consultation. Variations from this general pattern occurred in the following specialties.

Geriatrics. Forty per cent of referrals involved domiciliary consultation.

Medicine. Only 50 per cent of referrals were for

outpatient consultation, there being almost as many direct referrals for admission.

Paediatrics. Forty-two per cent of referrals involved admission to hospital.

Surgery. Twenty-six per cent of referrals involved admission.

Influence of workload

Referral rates are reported separately according to the numbers of consultations reported (Table 3). The rate of referral was significantly greater in the group of recorders with fewer than 500 consultations in the four-week period. No information is available from this study which allows more detailed study of these results.

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OBITUARY

Robert Smith Gibson, MB, CH.B, DPH

Dr R. S. (Robbie) Gibson died in Salisbury, Rhodesia, on 2 October 1977 after a long and painful illness

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extending over six years.

Born in Glasgow on 21 January 1919 he was educated at Merchiston Castle School, Edinburgh, and then at the University of Glasgow. He graduated MB, CH.B in June 1942.

After completing house jobs at the Royal and