## A SURVEY OF PRIMARY CARE IN LONDON

**Occasional Paper 16** 

General practice in inner cities has emerged as a topic of immense concern to patients, the profession and government but, although there are many anecdotes, prejudices and rumours, hitherto there has been a great shortage of facts.

A Survey of Primary Care in London, Occasional Paper 16, is the report of a working party led by Dr Brian Jarman, which gives more facts than have ever been assembled before about the medical problems in London and the characteristics of the doctors who work there. A particularly valuable feature is the number of comparisons with Outer London and England and Wales.

This is likely to become a classic reference for all those interested in the problems of primary care in big cities.

A Survey of Primary Care in London, Occasional Paper 16, is available now, price £4.00 including postage, from the Publications Sales Department of the Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU. Payment should be made with order.

## The

M&B May&Baker

## Diagnostic Quiz

The answers to the April quiz are as follows:

1. What might you suspect?

#### Transient global amnesia

2. What investigations might be considered?

#### EEG, syphilis serology

3. What, in your opinion, could this diagnosis be?

Cerebrovascular insufficiency

The winner of a £100 British Airways travel voucher is Dr C. H. Cantor of Faversham, Kent.

### WHY NOT?

# Why not modify the standard record card?

R. J. BARNES, MB, MRCGP General Practitioner, Gloucester

THAT most basic tool of general practice, the FP 7/8, has remained almost unchanged since it was first introduced prior to 1920. This is the more astonishing when just about everything else to do with the art of the family doctor has changed so much over the past 60 years. Certainly there have been strong moves towards standard A4 records, but as yet, for most doctors, these are for the future. At present we write or type miles of notes on multitudes of FP 7/8 cards each year. Although intended for continuation purposes, each one is provided with a large heading which includes space for date of birth, NHS registration number and address in addition to the more necessary surname and forename. I suspect that very few indeed are fully completed and the waste of writing space is considerable.

Why not redesign this card? We no longer need to segregate the sexes into red and blue; I suggest a unisex black. We need but a small heading at the top of one side for surname and forename alone, and surely we can use a single margin for the date and for noting home visits if desired. For those who type their notes, blank unlined cards should be provided—type never seems to sit on the lines of the present card.

Surely such modification is long overdue and for once might save money by having but one card for all? The present card allows the doctor to enter clinical notes on 53 per cent of the card, whereas the modified card would allow 76 per cent of the total space to be used. We all groan at the increasing size of our patients' records and the storage problems which they create. Here is a simple way to slow down that increase and perhaps save a little NHS money into the bargain.

<sup>©</sup> Journal of the Royal College of General Practitioners, 1982, 32, 370.