



Triage: A guide to urgency for non-clinical staff in general practice for telephone and walk in presentations

Do you have an urgent problem?

Yes/ I don't know

No

The next available appointment is Is that ok?

No

- Name and DoB of the patient?
- Nature of the problem?
- How long has it been happening?
- How severe is it?
- Previous major health problems?

Category 1

- Chest Pain
- Difficulty breathing/ trouble talking
- Facial/limb weakness
- Collapse/ altered level of consciousness
- Extensive burns

"Call 000"

Call GP/Nurse for help immediately

- Retrieve patient file
- Inform ED
- Provide information to ED

Document activity

Category 2

- Fitting
- Spinal or head injury/trauma
- Severe or allergic reaction
- Persistent or heavy bleeding
- Snake bite
- Heart palpitations
- In labour/ ruptured membranes
- Neck stiffness/ altered consciousness

"Go to emergency now"

Interrupt GP/Nurse for help immediately

- Retrieve patient file
- Inform ED
- Provide information to ED

Document activity

Category 3

- Injured limb/ possible fracture
- Poisoning/overdose
- Unable to urinate
- Eye injuries/ chemical in the eye
- Acute neurological changes including behavioural changes
- Child with lethargy
- unwell floppy infant
- pain - severe

Advise GP/Nurse now

- Retrieve patient file

Document activity

Category 4

- Unwell child/ elderly patient with:
 - Fever
 - Vomiting
 - Diarrhoea
 - Pain for >24hrs
- Pregnancy
 - Bleeding or pain
 - Reduced movement
- Abuse or assault
- Visual disturbances
- Patient or carer with extreme concern
- Psychological distress

"Come to the surgery now"

Discuss with GP/Nurse

- Retrieve patient file

Document activity

Category 5

- Unwell child/ elderly patient with:
 - Fever
 - Vomiting
 - Diarrhoea
 - Pain for >24hrs
- Rash
- Dehydration risk
- Bleeding
- Cut/laceration
- Eye infections
- Severe flu like symptoms

"Come to the surgery today and call back if it gets worse"

Inform GP/Nurse within 30 mins

- Retrieve patient file

Document activity

Category 6

- Adult with persistent fever but otherwise well
- Post operation problems
- Eye or ear infections / pain
- Adult with continuous vomiting and/or diarrhoea for > 24hrs

"Make an appointment within 24 hours and call back if it gets worse"

Inform GP/Nurse

- Retrieve patient file

Document activity



Front Desk Triage - how to manage common scenarios

Is this an Emergency?

- When answering a phone call, all callers should be asked if the matter is an emergency prior to the call being placed on hold; ask the patient, "Is this an emergency or can I place you on hold for a moment?"
- Consider the TRIAGE STEPS and CATEGORIES listed on the first page of this document to assess the patient's status.

Ask the Patient – Triage Steps

1. Confirm the patient's name and phone number
2. Does the patient attend the surgery (ie: does the practice have patient medical records to hand)
3. Location – Are you at home? Are you alone?
4. Nature of the problem (patient may prefer to speak to the nurse or on call doctor)
5. Duration of their symptoms – how long have you felt like this?
6. Severity of the problem – on a scale of 1-10 how severe is the pain – if applicable
7. Any previous major health problems – are you on any medication? Do you have allergies?

On the Day Emergencies in the Clinic

Category A Patients should be immediately seen by the on-call doctor or other medical professional on duty

Category B Patients should be directed to the emergency department of their nearest hospital

Category C Patients (and those with worsening symptoms) should be referred to the practice nurse or on call doctor

Category D Patients should be advised to attend the clinic immediately and be triaged by the nurse – may then be slotted in between appointments or at the end of the session

Category E Patients should make an appointment for the day and be advised to call back if symptoms worsen

Category F Patients should make a appointment within 24 hours and call back if symptoms worsen

All emergency cases dealt with by reception are to be recorded in the patient health records by the staff member concerned in addition to the clinical notes recorded by the nurse or doctor treating the patient.

Scheduling Care

- Reception staff should reserve a number of unbooked appointments each day for 'on the day' urgent appointments such as unwell children and elderly, as well as lacerations and suspected fractures.
- If your practice does not operate on an appointment system, patients should be triaged on walk in and advised of the expected waiting time to see the health professionals
- Where a patient is assessed as in need of urgent medical attention over the phone, advise the caller to hang up and call 000 immediately for an ambulance
- Where a receptionist is unable to determine the urgency of the call, the patient should be transferred to the nurse or on call doctor for triage
- If a patient presents in person and requires urgent medical assistance after the doctor has left, call 00 for an ambulance

Patients presenting with symptoms of Potential Communicable Diseases

- Such as flu/influenza, measles, chicken pox should be isolated to a secluded area of the clinic such as the nurses office. Where possible, a notice of isolation is to be fixed on the door to limit the access in this area.
- Patients with flu like symptoms should be required to wear a surgical mask
- Clinical staff treating the patient should wear as a minimum, a surgical mask, gloves, and when collecting nose and/or throat swabs, protective eyewear.
- If the patient is bleeding or vomiting, put on gloves before you assist them.

Emergency Action Plan

- Remain calm and don't panic
- Be aware of and respond to the safety needs of the emergency
- Assess which patient needs to take priority
- Deal with any injury or illness in order of severity

CALL 000 for ambulance, police or fire service