

Referring quality Assessment of Primary Health Care for Nephrology in Rio Grande do Sul, Brazil

Átila Szczecinski Rodrigues^a, Natan Katz^b, Erno Harzheim^c

^aTelessaúdeRS - Programa de Pós Graduação em Epidemiologia, UFRGS, Brazil

^bTelessaúdeRS - Programa de Pós Graduação em Epidemiologia, UFRGS, Brazil

^cTelessaúdeRS - Programa de Pós Graduação em Epidemiologia, UFRGS, Brazil

Abstract

Reducing the waiting time of patients for care in clinical specialties is one of the biggest challenges of the public health system in Brazil. This paper presents results of an assessment of quality research of referrals for Nephrology in the public health system in the state of Rio Grande do Sul, southernmost state of Brazil, the nucleus of telehealth and telemedicine, Federal University of Rio Grande do Sul (TelessaúdeRS/UFRGS). From the analysis of 2,008 requests for referrals to nephrology, it was found that in 7% of referring had insufficient information for evaluation and in 64% there is no clinical justification for authorization of referencing. The partial results of the study indicated that the lack of information makes it impossible to clinical regulation of these requests. The use of referencing protocols associated with telemedicine tools can assist doctors in primary health care in the clinical management and make access to specialized services more equitable and timely manner.

Keywords:

Nephrology, Telemedicine, Telehealth.

Introduction

The project Regulusus, came from a partnership between the core TelessaúdeRS/UFRGS, of the Federal University of Rio Grande do Sul (UFRGS), and the State Government of Rio Grande do Sul, aiming to qualify and reduce referrals to medical specialties. By April 2016, about 140,000 forwarding requests for non-resident patients in Porto Alegre, the state capital of Rio Grande do Sul, southern Brazil, waited for consultation in specialized service managed by the State Regulatory Complex. Due to the large volume of referrals, waiting times for appointments can reach several years.

One of the biggest barriers in internal medicine regulatory process is the lack of clinical information. This lack makes it impossible to evaluate the need for consultation and priority of access to health care in various specialties in the Brazilian state.

This study aims to evaluate the quality of clinical information of referrals for the Nephrology specialty. It is based on the development and use of referencing protocols previously

approved for use by the State Complex Governor of Rio Grande do Sul.

Materials and Methods

To develop the study, TelessaúdeRS/UFRGS researchers have developed referral protocols for six most common medical conditions in the area of nephrology (diabetes mellitus, cysts/polycystic kidney disease, hypertension, renal lithiasis, recurrent urinary tract infection and chronic kidney disease). Based on these protocols, a medical regulator reviewed the requests, between November 2013 and April 2016, obeying the following classification:

- Reference with clinical justification for consultation with an endocrinologist (authorized request);
- reference without clinical justification for consultation with an endocrinologist (TelessaúdeRS consulting);
- reference without sufficient clinical information to regulation (pending for lack of information).

Results

By April 2016 were 2,008 regulated forwarding requests for Nephrology. Of this total, only 585 (29%) were considered appropriate and sent for consultation. A total of 1285 cases (64%) were referred for teleconsulting with TelessaúdeRS/UFRGS team seen doubt in need of referral. Other 138 requests (7%) were returned to municipalities requesting the referral to supplementary information.

Conclusion

Partial results of this study indicate that the lack of information makes it impossible the clinically regulate the requirements. Patients whose clinical management can be performed in Primary Health Care make the demand is much greater than the supply and hinder access to patients really in need for consultation in specialized services. The use of referral protocols can help primary health doctors to make access faster and more equitable.

References

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