Emergency Medicine Standard Operating Procedures

Streaming of Urgent and Emergency Care Urology Patients to the Alexandra General Hospital

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Aim and scope of Standard Operating Procedure

Target Staff Categories

INTRODUCTION

The aim of this proposal is to safely re-direct ambulance patients and patients who have contacted NHS 111 away from Worcestershire Royal Hospital (WRH) to the Alexandra General Hospital (AGH) where there is 24/7 on-site specialist urology services.

PROTOCOLS

A. External - WMAS / NHS111 / General Practitioners

Patients ≥16yrs who fulfil any of the following criteria:

1. Patients with problems related to urological procedures / interventions within the last 14 days.

2. Patients with symptoms suggestive of Testicular torsion.

3. Male patients whose chief complaint is urinary retention, whether new or recurrent or associated with an indwelling urinary catheter (incl. suprapubic) and who require transfer to an Emergency Department.

Should be preferentially directed towards the AGH Emergency Department (A&E) in the case of NHS111 and in the case of ambulance patients taken directly to AGH ED by WMAS.

B. Internal – Urology Patients

Urology team advises all patients on discharge that if their problem recurs and is likely to be of a urological nature (eg. worsening of confirmed renal colic) or they encounter any post-operative problems then the patient should preferentially attend the AGH Emergency department if unable to seek advice from their General Practitioner.

Any patient telephone contact with the urology ward (eg. following discharge) which results in the advice to seek medical help should either be directed to the patient's General Practitioner or else to the AGH Emergency Department (A&E) for review by the urology team.