

**INTERNAL MEDICINE SERVICE AS A MEDICAL LINK WITH PRIMARY CARE:
REDUCTION OF INADEQUATE OUTPATIENT (OP) VISITS**

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INTRODUCCION/AIM: The lack of coordination between primary care (PC) and hospital care (HC) can produce inadequate hospital referrals, duplication of care, errors in medication, etc. There has been a 5% annual increase of OP visits in our Medicine Department since 1999. Our Internal Medicine Department created an outreach team to work together with the primary care teams (PCT) with the aim of improving an integrated and coordinated medical care by improving the resolution capacity of PCTs and reducing the number of inadequate outpatient (OP) visits in the Medical department.

METHODOLOGY: From January 2005, 10 consultant physicians had weekly clinical sessions with all PCT in our health area with the aim of reviewing all clinical and non-clinical pathways between both medical care levels, PA and HC. They had only consulting activity and facilitated the resolution of clinical problems in PC, supporting the PCTs and getting closer to the patient. We compared the number of OP appointments in the Medical Services between 2004 (control period) and 2005 (intervention period).

RESULTS: There was a 6.24% reduction in all OP appointments in the adult medical area (non-surgical). A 5% reduction in first visits and 7% in follow-up visits was observed. All OP medical specialties did benefit from this reduction, especially Internal Medicine (-27,6%); Cardiology (-14,16%) and Endocrinology (-9,56%).

CONCLUSIONS: Internal Medicine physicians working as a clinical link might optimize the clinical pathways between PC and HC, thus reducing the number of inadequate OP visits.

Key words: Delivery of Health Care, Integrated; medical link; Outpatients Clinic management