

Our Mater eConsultant has received 154 requests for advice to date

Thank you to all the GPs and stakeholders for your fantastic support and feedback on the **eConsultant** service.

GPs and stakeholders appreciate the benefits of the service to patient care:

“Most of my [eConsultant] patients... have been... a bit more complex, a few conditions going on at once, or they're elderly and frail and don't really want to be going through to multiple consultants... for their various issues... the patients are really grateful not to have to go for unnecessary investigations or outpatient appointments.” (GP)

The ease of using the service was noted by GPs:

“We've got the template in our medical software... it's filled out like any other sort of referral... it all gets virtually... auto-populated... so it's not more difficult than any other referral.” (GP)

Attached is a pre-print of the eConsultant implementation manuscript (submitted for publication) with additional feedback GPs and stakeholders who have used the service.

eConsultant Case Study Example

Day 1

Current Problems:

83 yr old female with persistent hyperphosphataemia and now hypercalcaemia. Normal PTH, vit (taking 1000IU daily, on Prolia), TFTs, renal function. Normal CK. No anaemia. No hyperlipidaemia

Medications: Aspirin, Crestor, Exforge, Levothyroxine, Lyrica, Nexium, Prolia, Tricortone Cream

Background: HTN, Hypo T4, chronic hyponatraemia, HH, GORD, pulmonary fibrosis (?cause), Hf

Other notable investigations include: P 1.56,1.53,1.65; Ca 2.74 (new), eGFR 65, K 5.4, Globulins and protein elevated, Hb 122. Paired PTH/Ca- Ca 2.74 with PTH 2.2 (non-suppressed). Vit D 63

Question: I appreciate your advice about whether any further investigation is required, and management recommendations.

Day 3

Physician responds:

I note the PTH is low but not suppressed as you may expect with such a high Ca.

Advised Management Plan:

1. Firstly I would cease the Vitamin D- it can elevate both Ca and P.
2. Repeat a paired Ionised Ca and PTH
3. We need to exclude Multiple myeloma given elevated globulins and Ca. (even though renal and Hb still normal). I would suggest serum and urine EPP, Serum free light chains and urine BJ protein. MM can also cause a pseudohyperphosphataemia.
4. Recheck Ca/P 2 weeks after ceasing Vit D to see if any effect.
5. May need further investigation after all of the above completed.

Follow-up
appointment

GP discusses advice with patient.

Our Mater eConsultant, Dr Narelle Fagermo

Director of General and Perioperative Medicine and Director of Physician Education at the Mater Adults Hospital in Brisbane has extensive experience as a hospital-based specialist, reviewing and treating patients with chronic and complex conditions.

Recording available of the eConsultant case study webinar

For those unable to attend our Mater eConsultant case study session with Dr Narelle, a [recording of the webinar](#) can be downloaded to learn how eConsultant is being used by your fellow GPs:

<https://cloud.rdm.uq.edu.au/index.php/s/Sn529knqarXpksQ>

Password: TccfHzns

The recording will be available until 25/09/2022.

Top hints for sending an RFA – download attached “Steps to sending”

Include:

1 – 2 targeted questions to orientate Dr Narelle to areas of focus.

As much information as you can about the patient including BMI and BP.

Sending attachments with an RFA

If you wish to send correspondence with an eConsultant RFA there is an option to send a second message with only PDF attachments by right clicking on the little “m” symbol in the software taskbar and selecting “create new message (PDF)”.

Answers to your frequently asked questions regarding eConsultant?

- eConsultant is available for public and private patients
- GPs charge patient at the same rate as would for generating a standard face-to-face OPD referral the physicians time is funded by the Mater
- the eConsultant Request For Advice (RFA) template is auto-populated from the patient record in the practice software
- the exchange between the GP and the Mater eConsultant specialist is via secure messaging both ways
- the model provides a documented record, for both the GP and the Mater, of the eConsultant advice

Areas of medicine covered by RFAs for the general physician eConsultant to date include (but not limited to) general medicine, endocrinology, musculoskeletal, haematology, renal, cardiovascular, hepatology, neurology, respiratory, gastroenterology.

Training for new staff or need a refresher

Our eConsultant program is ongoing and we are happy to provide support to get you started – if you or a team member would like refresher training via zoom or phone in the use of eConsultant please send a reply email with preferred dates and times to Dr Jenny Job – j.job@mater.uq.edu.au

A Mater eConsultant training video is now available and includes a brief overview of eConsultant and a quick guide to sending an RFA to the Mater eConsultant. Please reply if you would like a copy.

eConsultant in a nutshell

Professor Claire Jackson (CHSRI), Dr Narelle Fagermo (our Mater eConsultant), and Dr Jos (GP, Leichardt Medical, Mt Isa) have shared their experience with eConsultant on a video kindly edited by Paul Stone from WQPHN. You can view the video at: <https://vimeo.com/441180658/6ece0d4cdd>

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