

Acute serious illnesses and trauma

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Definition

Acute serious illnesses and traumatic injuries in general practice are conditions that require immediate care to relieve suffering. Some of these conditions may be life threatening, requiring urgent intervention.

The core skills required for the competent general practice management of acute serious illness and trauma presentations are similar to those required to manage emergency department presentations, including major trauma.

Acute serious illnesses and trauma can occur in patients of any age, may involve one or more body systems, and the context of the history may contribute to the required treatment response (eg. the collapsed patient or an accident site).

Acute serious illnesses can be classified by body systems including cardiovascular, respiratory, gastrointestinal, musculoskeletal, neurological, immune system, dermatological and metabolic conditions.

These presentations can also be classed into groups such as paediatric, obstetric, gynaecology, orthopaedic, surgical, general medical, psychiatric, ophthalmology, eye, and ear, nose and throat, among many others.

Traumatic conditions (accidents and injury to self and others) can generally be divided according to the causes, eg. road trauma, environmental, toxicological, envenomation, assaults and occupational injuries.

Rationale

Emergency life threatening presentations in general practice are uncommon and the presentation of traumatic injuries to general practice is decreasing with a trend for hospital emergency departments being used as the first line of management for physical injuries.¹ This creates a professional development challenge as general practitioners need to maintain skill levels even for the management of rare life threatening conditions, as well as for the more common conditions that present to general practice.

General practitioners are more likely to see acute serious illness in the early stages when early recognition of warning signs, early investigation and referral may be life saving. Early treatment and patient education may help prevent disease exacerbations and avoid conditions deteriorating into more serious and potentially life threatening conditions.

The diagnosis of acute serious illnesses may be clearer in patients presenting later in the natural history of the condition, but these patients may bypass the general practice and go to an emergency department.

Trauma due to injury may vary in severity of presentation. Minor trauma such as musculoskeletal injuries and lacerations can be managed in general practice.

As with serious acute illness, patients with major trauma are less likely to present to general practice and may go straight to emergency departments, but these may be staffed by GPs, especially in smaller or remoter rural hospitals.

General practitioners in rural and remote areas require a higher level of emergency care skills due to lower numbers of general practitioners, reduced access to specialist services, and the logistic and geographic difficulties of evacuating seriously ill patients. There is also a higher incidence of farming, mining, industrial and motor vehicle accidents and greater access to firearms in isolated areas.

General practitioners may also be required to treat acute conditions outside of the general practice or hospital setting such as a collapse on a street or an accident site.

Acutely ill patients require stabilisation and transfer and admission to an acute care setting. This may involve advocating for the admission of a patient.

Continuity of care for seriously ill patients requires the use of handover skills.

Emergency situations may require general practitioners to provide clear instructions to staff, take control of situations and demonstrate the ability to lead the general practice or another team. This may occur outside the general practice setting such as an accident site where leadership skills in sometimes chaotic and dangerous settings are critical to effective emergency management.

Personal safety issues for the general practitioner and practice staff are of more concern in emergency situations such as the management of acute psychiatric conditions or at the scene of an accident.

General practitioners need to be prepared to manage complex medicolegal and ethical decisions in the acute care setting such as the management of the unconscious patient, the patient with impaired ability to give informed consent when ill, next of kin issues, and being sensitive to patient and next of kin choices that may not accord with best possible treatment outcomes.

General practices also need to be able to prioritise patients according to treatment urgency. Within the context of regular general practice appointment systems, this will require the time management and organisational skills of both the GP and the general practice systems.

Acute serious illnesses may occur outside of usual practice hours. General practitioners require skills in after hours care, including telephone triage, to ensure that patients have access to appropriate levels of care.

The management of acute serious conditions has the potential to cause fear, fatigue and stress, and may be a significant risk to the doctor's own health and may impair clinical performance. General practitioners need to ensure that they have self care strategies in place to prevent and manage work related stress.

Refer to other curriculum areas as required. Acute serious illnesses and trauma can occur in any medical specialty area, although there is a common set of management skills required in managing any emergency situation. For specific areas consult other curriculum statements including *Aged care* for management of acute fractures in the elderly; *Children and young people's health* for consent issues in an emergency if no accompanying parent; *Chronic conditions* for medical emergencies; *Drug and alcohol medicine* for drug overdose and trauma including legal implications; *Men's health* for traumatic injury; *Mental health* for acute psychoses and follow up to manage post-traumatic stress disorder; *Multicultural health* for the use of translators; *Occupational health* for emergency workplace injuries; *Pain management* for acute pain management principles; *Sports medicine* for acute musculoskeletal injuries; and *Women's health* for domestic violence, partner abuse, and pregnancy.

The five domains of general practice

– acute serious illnesses and trauma

Communication skills and the patient-doctor relationship

General practitioners need to communicate clearly with patients and their carers when managing acute illnesses and trauma. During times of crisis, patients and carers are often distressed. Skilful, sensitive and accurate patient communication is critical in allaying anxieties and achieving successful management, especially in potentially life threatening situations. The patient may be unconscious or severely ill, impairing their ability to provide informed consent. Communicating with acutely ill patients may be influenced by age, and other factors including gender and ethnicity. Sensitive, empathic communication is also required when breaking bad news to patients and carers, in times of bereavement, for issues around certifying death, and coroner and police involvement. General practitioners providing out of hours emergency care will require appropriate telephone triage communication skills.

Applied professional knowledge and skills

Maintaining skill levels in general practice for the management of acute illnesses is educationally challenging as emergency presentations are not common, but require immediate skillful treatment by the clinician. Some general practitioners, such as those in rural and remote settings, may require a higher level of emergency general practice skills. Emergency general practice care involves the diagnosis and immediate management of a range of life threatening medical, surgical and psychiatric conditions. General practitioners need to be able to recognise and evaluate acutely ill adults and children, and identify which patients require immediate resuscitation and transfer to acute care settings. An appropriate level of care is required when transferring severely ill patients from the general practice to the acute care setting. Time management skills will be required to prioritise patients according to the seriousness of the patient's condition. Identifying which patients are likely to become progressively more ill and providing management advice, including how to access care if the condition deteriorates, helps prevent acute serious illness in the general practice setting. General practitioners may also have to deal with manipulative patients who request inappropriate emergency treatment. Out of hours management skills are required to manage acute serious illnesses and trauma, which may occur when the practice is closed. General practitioners will need to be able to diagnose and certify patient death.

Population health and the context of general practice

Although acute illnesses and trauma are not common in the general practice setting, knowledge of the range of presentations is necessary to be able to identify and manage acute illnesses and identify potentially life threatening situations. Cultural, occupational or other factors may affect management of acute illnesses and trauma in the general practice setting. Carers may be involved at the time of the acutely ill person's presentation in the general practice setting and there may be conflict between patients and their relatives. Education of the patient and carers may also help to prevent disease exacerbations and the frequency of preventable emergency presentations, eg. the use of preventative asthma medications to prevent asthma attacks.

Professional and ethical role

Complex ethical decisions often need to be made when managing acute illnesses and trauma, and the patient's choices and wishes need to be respected. Decisions are often best made in consultation with colleagues. Leadership is required in times of crisis such as the management of acute illness. General practice staff will look for clear direction and instruction in the management of acute illness, trauma and crisis situations. The general practitioner may need to act as an advocate for patients requiring admission when referral centres refuse admission where another doctor has not assessed

the patient. The management of acute illnesses and trauma can engender fear and stress in the general practitioner, staff and others. Self care strategies need to be in place to reduce the potential health adverse effects on clinicians who care for acutely ill patients. This is for personal occupational health and safety, and to prevent stress related performance impairment. Colleagues in distress may require intervention and support.

Organisational and legal dimensions

Acute serious conditions and trauma may present to general practice at unexpected times, requiring that patient consultation times be prioritised according to the severity of the presenting illness. Triage procedures need to be in place to ensure that seriously ill patients are seen first, and the clinician will need to manage time accordingly. Seriously ill patients needing referral and transfer from general practice to the acute care setting require clear communication between the general practitioner and other health workers within and outside of the practice. Patient transport requires that an appropriate level of care is maintained throughout the journey to the acute care setting. Acutely ill patients need to be able to access appropriate out of hours general practice care and the management of acute illnesses and trauma may take place outside of the general practice setting at accident sites or in the patient home. Some serious conditions may present potential significant personal security risks to self, staff, patients and others, eg. in an acutely disturbed psychiatric patient or at an accident site. Patients will require follow up after referral to the acute care setting and some patients may require rehabilitation services to help recover from serious conditions. Handover skills and procedures are vital to ensure continuity of care for acutely ill patients. Some serious illnesses will require exercising legal responsibilities such as using mental health regulations, certifying death or contacting the police and coroner. Sick adults may have an impaired ability to give informed consent and there are special issues when obtaining informed consent for treating an ill child.

Learning objectives across the GP professional life

Medical student

Communication skills and the patient-doctor relationship

- Describe why a patient centred approach is used in the management of acutely ill patients with diminished capacity for autonomous treatment decisions due to illness.
- Describe how communication in acutely ill patients may be influenced by age and other factors such as gender, ethnicity.
- Describe the principles involved in breaking bad news to patients and carers.

Applied professional knowledge and skills

- Describe the abnormal physiology and manifestations of critical illness.
- Recognise how an acute illness may be an acute exacerbation of a chronic disease.
- Discuss the principles of medical triage.
- Describe why resuscitation may need to precede full assessment.
- Demonstrate the basic principles of airway management, ventilatory and circulatory support.
- Describe contemporary practices in basic and advanced life support.
- Demonstrate cardiopulmonary resuscitation.
- Describe how to assess patient vital signs.
- Describe the general clinical presentations of important acute serious illnesses and trauma.
- Describe the diagnosis and management of common and important acute serious illnesses and traumatic conditions including eye problems, chest pain, the collapsed patient, acute abdominal pain, respiratory problems (eg. asthma), major trauma (eg. face and spine), and common fractures (eg. hip fractures in older people, wrist fractures in the young).
- Understand safe practice of common clinical skills such as intramuscular injections, blood taking (including blood cultures, preparation of intravenous fluids), use of nebuliser, simple suture and current tetanus recommendations.

Population health and the context of general practice

- Describe the role of general practice in the primary care management of acute illness and traumatic injury.
- Describe the patterns of presentation and care of acute serious illnesses and traumatic injury in the Australian health care setting.
- Describe the epidemiology of common presentations of acute serious illness and traumatic illnesses listed in the previous section, *Applied professional knowledge and skills*.

Professional and ethical role

- Discuss the impact of clinician fear, fatigue and stress associated with the treatment of seriously ill patients
- Describe the personal health risks to doctors providing acute health care including personal safety, fatigue and stress, and the potential impact of practitioner impairment on patient health.
- Describe the importance of infection control in the acute health care setting.

Organisational and legal dimensions

- Discuss the role of informed consent in the treatment of acutely ill patients.
- Describe processes for obtaining informed consent in acutely ill minors.
- Describe potential threats to personal safety in the treatment of acutely ill patients.
- Describe the application of mental health legislation to patients with severe mental illness.
- Describe the laws that relate to certifying death.
- Describe mandatory reporting requirements, including when the coroner and police need to be notified in cases of death.

Learning objectives across the GP professional life

Prevocational doctor

Assumed level of knowledge – medical student

Communication skills and the patient-doctor relationship

- Use a patient centred approach to manage acutely ill patients who may have a decreased ability to make autonomous treatment decisions because of their illness.
- Use clear, culturally appropriate communication to manage patients with acute illnesses and trauma.
- Demonstrate how to discuss serious illness and bereavement with patients and their carer including breaking bad news.

Applied professional knowledge and skills

- Recognise and evaluate acutely ill patients.
- Identify which acutely ill patients require immediate resuscitation and when to call for assistance.
- Identify the clinical presentations of important acute serious illnesses and trauma.
- Demonstrate the assessment of a sick child.
- Accurately and efficiently diagnose and manage common and important acute serious illnesses and traumatic conditions including eye problems, chest pain and respiratory problems (eg. asthma).
- Perform and interpret an electrocardiogram.
- Demonstrate:
 - cardiopulmonary resuscitation of children and adults including the use of a defibrillator
 - how to control haemorrhage
 - how to suture a wound
 - how to use a nebuliser
 - male and female catheterisation
 - basic airway management, ventilatory and circulatory support.
- Diagnose death and write death certificates.

Population health and the context of general practice

- Describe how cultural, occupational or other factors may affect patient management in the acute care setting.
- Demonstrate the ability to identify conflicts that may exist between patients and their carers, and act in the best interests of the patient.

Professional and ethical role

- Describe ethical complexities of caring for acutely ill patients.
- Describe the impact of acute illness and trauma on the ability to give informed consent.
- Participate in decision making and debriefing when ceasing resuscitation.
- Describe the leadership role that may be required of a doctor in emergency situations.
- Show an ability to work well within medical teams during emergencies.
- Outline measures that can be taken to promote clinician self care.
- Demonstrate how to recognise a clinician in difficulty.
- Describe how to consult colleagues about ethical concerns.

Organisational and legal dimensions

- Demonstrate accurate note taking and recording in emergency situations.
- Demonstrate how to give high priority to acutely ill patients.
- Demonstrate handover procedures for acutely ill patients.
- Describe the management of the aggressive patient.
- Describe legal responsibilities regarding death certification, including when to involve the coroner and police.
- Describe how to apply mental health regulations for detaining acutely mentally ill patients.
- Describe the importance of maintaining or increasing the level of care during transport.

Learning objectives across the GP professional life

Vocational registrar

Assumed level of knowledge – prevocational doctor

Communication skills and the patient-doctor relationship

- Demonstrate consultation skills appropriate to the management of acute illness and trauma in the general practice setting.
- Demonstrate clear communication with the patient and their family in the general practice setting during times of crisis.
- Demonstrate how to triage patients by telephone and decide whether to give telephone advice, arrange to see patient at an appropriate time, or to arrange emergency transfer.
- Describe how to sensitively communicate to patients and carers in life threatening situations or at times of bereavement, including issues around certifying death, and coroner and police involvement.

Applied professional knowledge and skills

- Demonstrate a range of essential procedures and skills for the management of acute illness and trauma presentations.
- Demonstrate decision making skills in the effective management of acute illness and trauma presentations.
- Identify which patients may become acutely ill and give management advice including how to access care if condition deteriorates.
- Demonstrate the management of common medical, surgical and psychiatric emergencies in the out of hours setting.
- Describe when resuscitation or intensive care may be inappropriate.
- Demonstrate the appropriate level of care of resuscitation and stabilisation required to transfer severely ill patients from the general practice setting to the acute care setting.
- Demonstrate essential advanced life support skills.
- Describe procedures for managing manipulative patients to prevent the inappropriate use of health care resources.

Population health and the context of general practice

- Demonstrate how to use patient education to help reduce the number and frequency of preventable presentations.
- Describe the needs of carers involved at the time of the acutely ill person's presentation in the general practice setting.

Professional and ethical role

- Demonstrate an ability to make complex ethical decisions in accordance with a patient's wishes.
- Show how to use a team based approach in the management of acute illness in the general practice setting including how to provide leadership and how to follow instructions.
- Describe how to act as an advocate for patients requiring admission when referral centres refuse admission when they have not yet assessed the patient.
- Describe the strategies in place to reduce the potential impact of providing acute care on the health of the GP and to help prevent stress related performance impairment.

Organisational and legal dimensions

- Demonstrate how to prioritise patient consultation times according to the severity of the presenting illness.
- Describe procedures for the appropriate referral and transfer of acutely serious patients from the general practice to the acute care setting including the role of effective communication with other health workers.
- Describe how acutely ill patients can access out of hours care in the general practice setting.
- Evaluate the awareness and management of the personal security risks to self, staff, patients and others, eg. at an accident site.
- Outline geographical and logistical transport issues for acutely unwell patients from rural and remote areas to tertiary centres.
- Describe how patients are followed up after transfer to the acute care setting.
- Describe the rehabilitation services available for patients who have suffered acute serious illness or trauma.

Learning objectives across the GP professional life

Continuing professional development

Assumed level of knowledge – vocational registrar

Communication skills and the patient-doctor relationship

- Review special communication needs of practice populations such as use of interpreters.
- Review educational needs to maintain communication skills.

Applied professional knowledge and skills

- Maintain competency in advanced life support skills, including through structured courses and professional development.
- Consider developing further advanced life support skills, especially in rural and remote areas.

Population health and the context of general practice

- Consider use of patient education to prevent acute exacerbations of chronic conditions.
- Consider the need for differing or increased general practice in provisions of local emergency health services, eg. in rural and remote areas.
- Consider the role of the practice in the event of bioterrorism or other emergency.

Professional and ethical role

- Review skill levels in emergency medicine to ensure ongoing skill level maintenance.
- Review self care strategies.

Organisational and legal dimensions

- Review practice staff safety procedures and measures.
- Review practice staff capacity for dealing with acute situations.

References

1. Britt H, Miller GC, Knox S, et al. General practice activity in Australia 2004-05. AIHW Cat. no. GEP 18. Canberra: Australian Institute of Health and Welfare, 2005, p. 91.