

AFP in Practice questions are designed to get you started in a small group learning (SGL) activity in your practice or with colleagues. Requirements to earn 40 Category 1 CPD points for a SGL activity are: minimum of four and a maximum of 10 people, minimum of 8 hours of discussion in a year, and at least two GPs. Groups may include anyone else who has an interest (ie. practice nurses, community health workers, allied health professionals). A kit with all the instructions and forms you need is available at www.racqp.org.au/afpinpractice. You can also earn Category 2 points based on these questions at AFP practice challenge. Visit www.gplearning.com.au Carolyn O'Shea



## Learning objectives

After completion of this activity participants will be able to:

- identify communication strategies to achieve early specialist review
- use knowledge of a common eye problem assessment or management in a consultation
- apply prevention strategies to a common condition
- describe the role of an optometrist in Australia
- analyse a practice system for areas for improvement.

# Category 1 – SGL questions

## Domain 1 - Communication skills and the patient-doctor relationship

ICPC codes: F99-67

At times there can be an important clinical finding requiring prompt management, but it can be difficult to articulate exactly what you are hearing and seeing and why another person should assess and manage the patient promptly. How can you convince the ophthalmology registrar that this patient needs to be seen promptly when the usual waiting list is 6 months, and you are not positive what you are seeing and exactly what it means?

• Suggested learning activity: in pairs take turns in being the general practitioner and the person at the other end of the phone who manages access to urgent ophthalmology reviews. Each think of a time or case when you wanted an urgent review, then call and try and arrange it; the other person can role play the time they found it the most difficult to get a review when they felt one was required. Then as a larger group discuss your experiences. What communication strategies worked in getting the review? What was unhelpful?

### Domain 2 – Applied professional knowledge and skills

ICPC code: F99

Eye conditions require specific skills for assessment, and at times, specific knowledge to manage or answer patient questions.

· Suggested learning activities:

Obtain fundoscopy pictures (either from a book or an online search), then as a group look at the images and discuss the diagnosis and management for each one.

Cataract operations are a very common procedure. When referring patients for consideration for a cataract operation, they will sometimes ask about the practicalities of follow up. Find out what the routine follow up procedures are after cataract surgery.

At times patients ask about your opinion about the suggestions for management from specialists. One such example is ranibizumab injections for wet age related macular degeneration (ARMD). What are the benefits, risks and treatment schedule for ranibizumab?

### Domain 3 – Population health and the context of general practice

ICPC codes: A99-49

The article 'Reducing vision loss in chronic eye disease' by Fong and Lee in this issue of Australian Family Physician, considers prevention strategies using the framework of primary, secondary and tertiary prevention strategies.

· Suggested learning activity: consider another chronic disease (examples could include diabetes or hypertension), and consider this disease in the framework of primary, secondary and tertiary prevention strategies. Then discuss how you and your practice can contribute to activities to implement these strategies.

#### Domain 4 - Professional and ethical role

ICPC codes: F99-66

Optometrists play an important role in the assessment and management of eye conditions. They deal with the most common cause of visual impairment, which is refractive errors; however they also have skills and the ability to diagnose and manage other conditions. At times it can be difficult to know local optometrists and their skills and abilities, however many of our patients also see them for a range of reasons including accessibility.

• Suggested learning activity: either invite a local optometrist to your group, arrange a visit as a group or by a member of the group who can report back, or find out independently what range of skills, equipment and abilities a local optometrist has. Discuss what conditions you may refer to an optometrist, what they may refer to you, when they may refer directly to an ophthalmologist, or what an optometrist may assess and manage independently of any medical input. What are the implications?

#### Domain 5 – Organisational and legal dimensions

ICPC codes: F05, F94, F99

Practice systems can be an invaluable tool in appropriate immediate and long term assessment and management of patients.

· Suggested learning activities:

The practice is overbooked for the day and a patient rings requesting an urgent appointment as she cannot see out of her left eye. What is the response of the person taking the call? What practice systems/information will help the person taking the call? Based on what you establish, does anything need to be changed or improved?

Consider the systems in your practice for managing diabetic patients. Can you identify which patients have not had an eye review? If not, how can you improve this? If you can, how can you help to get more diabetic patients to have recommended eye reviews?