



Position Statement

Non-GP initiated testing

1. Position statement

To ensure patient safety and to reduce medicolegal risk, it is crucial that general practitioners are not sent unsolicited patient test results, especially where there is no context to the testing.

This paper outlines the RACGP's position regarding non-GP initiated testing.

2. Background

Pathology and diagnostic testing play a significant role in illness prevention and chronic disease management. The ordering of such testing by GPs is the foundation of preventive health and early detection of disease in the Australian healthcare system. These activities also play a vital role in improving health outcomes and increasing life expectancy for all Australians.

Given the central role that GPs play in the provision of coordinated patient centred care, it is clear that GPs have both a legal and ethical obligation to ensure that test results are recorded and appropriately followed up.

Keeping this in mind, arrangements for receiving unsolicited pathology and diagnostic test results is of significant concern to the GP profession and the College. To ensure patient safety and to reduce medicolegal risk, it is crucial that GPs are not sent unsolicited patient test results, especially where there is no context to the testing.¹

2.1 Definitions

Pathology testing: A form of diagnostic testing which is interpreted by a specialty branch of medicine concerned with the study of the nature and cause of disease, including changes occurring as a result of disease.

Diagnostic testing: A form of medical imaging which is performed with the intention of diagnosing disease. A range of diagnostic tests exist and include, but are not limited to, magnetic resonance imaging, computed tomography scans, ultrasounds and positron emission tomography.

2.2 Related policies, documents, legislation and strategic priorities

- The RACGP *Standards for general practices* (4th edition)
- The RACGP *Collaborative Care Agreement for GPs and nurse practitioners*

3. RACGP policy

In general practice, diagnostic and pathology tests play an essential role in the delivery of quality healthcare. General practitioners are legally obliged to ensure that all test results are recorded and appropriately followed up with their patients. This requires diligent management and maintenance of a patient's health records, including effective and transparent communication between the GP and the patient.

A number of recent legal cases have clarified that all GPs have a duty of care to follow up test results with their patients.² This requires GPs and their practices to have rigorous protocols and processes in place to ensure that test results have been communicated to the patient and recorded in their health record.

The RACGP's *Standards* (4th edition) require that accredited general practices have a rigorous system whereby all pathology results, imaging reports, investigation reports, and clinical correspondence received by the practice are reviewed, acted upon by the treating doctor, and incorporated into the patient's health record.³

The systems identified by the College's *Standards*, to support effective follow up of pathology results include:

- a documented system for follow up tests and results, with a strong focus on risk management
- a practice system that delineates mechanisms for dealing with normal results, abnormal results (urgent and nonurgent) and important tests and referrals

- a practice system that delineates mechanisms for follow up of results and follow up of clinically significant tests
- a practice system that covers how tests and results are communicated to patients.

A robust patient centred process as described in the *Standards* reduces fragmentation of care, reduces the siloing of patient care, and ensures that there is a central point-of-care for managing multiple test results and ordering. Operating outside of this system creates patient safety issues, and increased medicolegal risk.⁴

Patient safety is paramount and the establishment and maintenance of such rigorous recall and reminder processes facilitate quality patient care, reduce harm to patients, and reduce the risk of medicolegal risk to GPs.

Given that GPs and practices are responsible for communicating test results and coordinating recall and follow up processes for tests ordered by GPs, the receipt of any unsolicited results can trigger 'duty of care' requirements for GPs who receive them.¹

To reduce risk to patient safety and to reduce the risk of litigation for GPs, the College advocates that GPs should not be sent unsolicited test results. Instead, the test initiator and/or pathology/diagnostic company should communicate all test results to the patient directly with recommendations for the patient to follow up with their GP.

References

1. The Royal Australian College of General Practitioners. *Guide to Collaborative Care Agreements*. South Melbourne: RACGP, 2011:6-7.
2. Bird S. The duty to follow up. *Australian Family Physician* 2006;35:251-4.
3. The Royal Australian College of General Practitioners. *Standards for general practices*. 4th edn. South Melbourne: RACGP, 2010:40-4.
4. Bird S. A GP's duty to follow up test results. *Australian Family Physician* 2003;32:45.