

10 February 2022

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Tēnā koe Andrew

Official Information Request- OIA 14060 Transfer H202116573 Procedures and Guidelines

The Whanganui District Health Board (WDHB) has received the transfer of your request from the Ministry of Health on 22 December 2021 under Section 14 of the OIA. You requested the following information:

1. What are the official Guidelines/procedures for urgent X-rays (24 hour)?
2. What are the Guidelines/procedures for patients repeatedly admitted to Emergency Department with severe epigastric pain/ and upper right and left quadrant pain?
3. Guidelines/procedure for investigating possible Colonic Motility Dysfunction/Defecatory Disorders/Anorectal Dysfunction.

The Whanganui District Health Board response:

1. What are the official Guidelines/procedures for urgent X-rays (24 hour)?

For excerpt from the Radiology Department General Manual, WDHB-8632 v21, See Appendix 1.

2. What are the Guidelines/procedures for patients repeatedly admitted to Emergency Department with severe epigastric pain/ and upper right and left quadrant pain?

The patient's complaints will always be worked up aggressively in the ED. Should there be no clear ethology of the patients' abdominal pain, the patient is generally referred home with analgesia/antiemetic therapy with close outpatient follow up with the GP and/or WAM in 12-24 hours should the pain persist. If the pain worsens acutely, the patient is advised to return to the ED immediately for additional evaluation. If this pattern of presentation persists, the patients are generally referred for additional outpatient imaging as indicated (Ultrasound, CT-scan, MRI, etc) and are given a referral to the General Surgery outpatient clinic for further evaluation and treatment.

3. Guidelines/procedure for investigating possible Colonic Motility Dysfunction/Defecatory Disorders/Anorectal Dysfunction.

These conditions are fortunately relatively rare. Investigations and management are individualised to the patient.

Chief Executive | Phone 06 348 3140 | Fax 06 345 9390

Should you have any further queries about the above information, please contact our OIA co-ordinator Anne Phoenix at anne.phoenix@wdhb.org.nz

Ngā mihi



 Russell Simpson
Kaihautū Hauora– Chief Executive
Whanganui District Health Board

Appendix 1. Urgent x-rays, excerpt from WDHB-8632 v21 Radiology Department General Manual

Emergency Department

Purpose

The following document outlines departmental procedure with regard to access to radiology services for ED patients.

Procedure

Priority

- Emergency patients are given priority over ward, OPD or GP patients. Emergency should ring prior to bringing a patient to the department if they want to be seen straight away.
- These patients are x-rayed in the x-ray room adjacent to the Emergency Department.

Portables

- These need to be treated as very urgent. The examination needs to be written on the white board – e.g. 1530 chest x-ray in Resus 2.
- The MRT completing the examination writes their initials on the white board next to the job.
- Trauma calls – where possible a MRT and student (when available) should attend.

Spinal & fracture patients

- Patients should present to radiology on an x-ray trolley. If not, ring ED and send the patient back to ED to be transferred to a correct trolley.
- These patients should not be moved off the trolley or lifted under any circumstances.
- If the patient is mobile, you must clear it with the referring Dr (and document this on RIS) before you stand the patient.

Patients in pain

- If the MRT feels that their patient's pain is too great, and that the taking of an x-ray or scan will cause unnecessary discomfort to the patient they should contact the patient's nurse/doctor and arrange for some pain relief before they start the examination.

After hours

- After 1630 and at weekends the MRT must carry the 121 Pager at all times.
- The patients GP should be entered so a report is sent to them as well as ED.

Call back

- Emergency should only call the MRT back when it is an emergency situation or where the clinical management of the patient is dependent on an x-ray. The MRT may question the doctor.

Related Documents

Portable X-rays