

# E-consultation between primary and secondary care givers to arrange health care services more efficiently.

Gepubliceerd: 16-12-2014 Laatst bijgewerkt: 18-08-2022

E-consultation between General Practitioners (GPs) and internists regarding patients in which the GP is doubtful regarding management or referral, will decrease the number of referrals to the internal outpatient clinic.

<b>Ethische beoordeling</b>	Positief advies
<b>Status</b>	Werving nog niet gestart
<b>Type aandoening</b>	-
<b>Onderzoekstype</b>	Interventie onderzoek

## Samenvatting

### ID

NL-OMON25112

### Bron

NTR

### Aandoening

E-consultation, general practice, internal medicine, RCT. E-meedenkconsult, e-consultatie, huisartsgeneeskunde, interne geneeskunde, RCT.

### Ondersteuning

**Primaire sponsor:** Medical Coordination Centre Omnes

**Overige ondersteuning:** Medical Coordination Centre Omnes

### Onderzoeksproduct en/of interventie

### Uitkomstmaten

#### Primaire uitkomstmaten

Number of referrals to the internal outpatient clinic after six months.

# Toelichting onderzoek

## Achtergrond van het onderzoek

We started this randomized controlled trial (RCT) in February 2015. Beforehand, we calculated that a

minimum of 200 participants was needed to be able to draw statistically significant and relevant

conclusions in the sample size calculation. Between February 1, 2015 and March 8, 2016 only 77 e-

consultations were registered by the GPs. At this rate it would have taken much too long to reach the

estimated target of 200 participants and we would have denied the GPs the option of e-consultation as

regular care for too long.

Therefore we decided to stop the RCT and offer the GPs the option of e-consultation as regular care

from September 2016 onwards. To monitor possible effects of e-consultation for this patient population,

we will use routinely used medical data sources in an observational retrospective design with a

comparison of two groups; the group of patients for whom e-consultation was used and the group

patients directly referred to internal medicine.

## Research questions

How often are patients, for whom e-consultations between GPs and internists are deployed, referred to

internal medicine within six months after the e-consultation? How does this group of patients differ

from the group directly referred to internal medicine?

## Data collection

We will only use routinely used medical data sources. Relevant data on diagnostic

procedures, referrals

and secondary care of both groups will be collected from digital systems Zorgdomein, GLIMS en SAP.

These evaluations will be performed twice; at the start of 2017 and 2018.

The Medical Ethical Committee of Zuyderland Medical Centre approved this amendment on august 2,

2016.

## **Doel van het onderzoek**

E-consultation between General Practitioners (GPs) and internists regarding patients in which the GP is doubtful regarding management or referral, will decrease the number of referrals to the internal outpatient clinic.

## **Onderzoeksopzet**

Two weeks and six months.

## **Onderzoeksproduct en/of interventie**

E-consultation (E-meedenkconsult) via the GP internet programme ZorgDomein. In the e-consultation the GP presents the patient case to the internist and the internist gives advice after four working days. The internists will give advice for all patients in the study (intervention and control patients). However the GPs will only receive the advice on intervention patients.

## **Contactpersonen**

### **Publiek**

-  
Dennis Muris  
Maastricht  
The Netherlands

### **Wetenschappelijk**

-  
Dennis Muris  
Maastricht

## Deelname eisen

### Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Patients with symptoms in the internal medicine spectrum. The GP is doubtful regarding management or referral. The patient is 18 years or older. Informed consent. GPs associated to Medical Coordination Centre Omnes.

### Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

The patient is already under treatment of the internist for the present symptom(s). The patient should be referred urgently or in a crisis situation. The GP is sure that the patient should not be referred. The GP is sure that the patient should be referred.

## Onderzoeksopzet

### Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

### Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-01-2015
Aantal proefpersonen:	200
Type:	Verwachte startdatum

## **Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)**

**Wordt de data na het onderzoek gedeeld:** Nog niet bepaald

## **Ethische beoordeling**

Positief advies

Datum: 16-12-2014

Soort: Eerste indiening

## **Registraties**

### **Opgevolgd door onderstaande (mogelijk meer actuele) registratie**

Geen registraties gevonden.

### **Andere (mogelijk minder actuele) registraties in dit register**

Geen registraties gevonden.

## **In overige registers**

### **Register**

NTR-new

NTR-old

Ander register

### **ID**

NL4831

NTR4954

- : 14-N-69

## **Resultaten**