



The acutely unwell resident in the Aged Care Home

Guide to basic clinical assessment & ringing the GP

This guide is for Aged Care Home staff to help you provide enough clinical information over the telephone for the GP to decide the course of action for the acutely unwell resident. It does not replace clinical care protocols within your Aged Care Home eg: relating to falls, or specific resident care plans eg: diabetic management. The guide may also be useful if you need to ring a locum, ambulance or hospital.

Step 1. General assessment

Assess

- does the resident **look unwell**
- main symptoms** eg: distress, pain, difficulty breathing, etc.
- main physical signs** eg: alert, pale, sweating, dehydrated, etc.
- vital signs:** pulse rate (regular / irregular), temperature, respiratory rate, blood pressure, blood sugar level (BSL)
- consider **resident care plan** and **wishes of resident/relatives** or any **Advance Care Directives**
- decide on **urgency:** ring the GP **or** wait till GP available in-hours **or** call locum **or** discuss with hospital ED **or** ring ambulance

Step 2. Ringing the doctor

Before ringing, have in front of you

- drug chart** including allergies
- patient notes** (with documented vital signs and assessment-Step 1)

Tell the doctor

- your name and title** (eg: Div1 RN, Div 2 RN, PCA), and **name of resident**
- main reason** for ringing eg: change in cognitive state / alertness, chest pain, abdominal pain, vomiting, resident had a fall, suspected UTI, palliative care, family request, etc
- how long** problem has been present and whether **recurrent**
- who assessed** the resident (name and title) and what **time**
- describe general assessment (Step 1)**
- who** requested the doctor be rung (ACH staff/ resident/ family)
- what action** has been taken already eg: pain relief, anginine, etc.

If you have to leave a message, leave

- name of Aged Care Home, telephone number and time of call
- name of resident
- your name and title
- main reason for ringing
- urgency/how soon you need the doctor to ring back

Step 3. Action

After the telephone call, document...

- name and telephone number of GP / locum and time rung
- whether GP / locum will attend and date and time expected

... and implement

- immediate action / instructions** eg: medication order, monitor resident, call locum, call ambulance, etc.
- contact family** as required