Virtual triage makes Minor Operations Service more efficient during the COVID-19 pandemic

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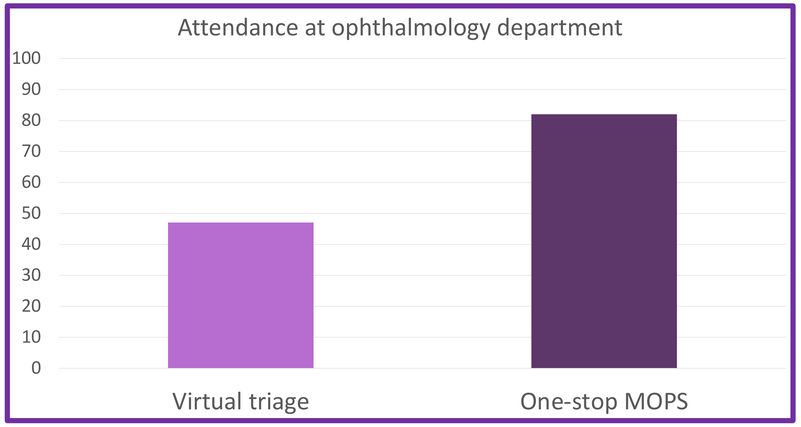
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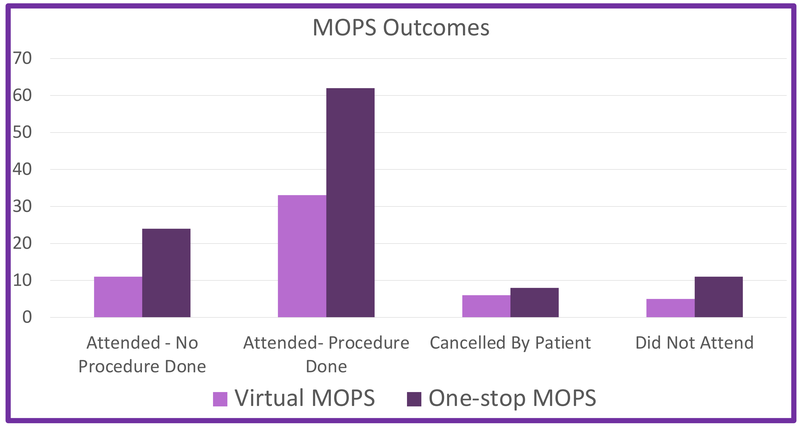
Background

Telemedicine services have become prevalent in the NHS during the COVID-19 pandemic[1]. We describe the impact of a virtual triage model on surgical case load, patient footfall in the clinic and on-the-day cancellations for Minor Operations Service (MOPS).

Methods

We conducted a retrospective case review of patients referred for minor lid lumps or malpositions. All cases referred between August and November 2020 received a telephone or video consultation (AccuRx Web platform[2]) to evaluate need for surgical intervention. Cases referred November- December 2019, booked directly for one-stop MOPS, served as a comparator group.





Results

100 cases were offered virtual consultations and compared with 105 cases invited for one-stop MOPS (median age 61yrs, IQR 43-75yrs). Video was used in 60% of virtual consultations (median age 43yrs, IQR 37-60yrs), telephone in 33% (median age 60yrs, IQR 47-75yrs) and 7% of patients were unreachable. Following the virtual consultation, 42 patients were discharged and 3 referred to oculoplastic outpatients. 55 patients were listed for surgery.

Conclusion

In our experience, virtual triage prior to listing for MOPS reduced patient attendances to the department, reduced number of patients listed for surgery and reduced on-the-day cancellations of procedures. We plan to continue virtual triage for MOPS as our standard of care.

References

1. Kang S, Thomas PBM, Sim DA, et al. Oculoplastic video-based telemedicine consultations: Covid-19 and beyond. *Eye (Basingstoke)* 2020; 34: 1193–1195.
2. Home, https://www.accurx.com/