



Dr. Trevor Schuler, Urologic Surgeon at NAUC

Urology is improving access, one Advice Request at a time

By Jennifer Vanderlaan

On September 22, 2017, Urology in the Edmonton Zone became the fifth specialty to go live with eReferral Advice Request. The specialty has garnered quite a bit of attention since implementation, receiving over 4,000 Advice Requests to date, 400 of which arrived within the first week. The influx of requests is staggering, but not surprising given that Urology is essentially centralized within the Northern Alberta Urology Centre (NAUC) and interacts with 1,300 primary care doctors.

Prior to the implementation of Advice Request, this high volume-high demand specialty managed referrals solely over the phone. This process acted as a safeguard, allowing the centralized triage team (one registered nurse and four medical office assistants) to collect the necessary information from the referring provider to accurately assess the needs of the patient.

Despite a newly established central referral triage program, patients still faced barriers with regards to access. The team at NAUC recognized the specialty continued to struggle to meet the needs of primary care and saw an opportunity to remove barriers and improve access for patients by implementing Advice Request.

“We’ve always been looking for new ways for people to access us,” says Dr. Trevor Schuler, Urologic Surgeon at NAUC, “and Advice Request has provided primary care doctors with that additional avenue for access.”

Of the over 4,000 requests Urology has received to date, Dr. Schuler, along with 12 Urologists at NAUC, have provided advice that has allowed for roughly 40 per cent of incoming referrals to be managed in primary care and, in many cases,

closer to home. Without Advice Request, a great deal of patients would have been waiting for an appointment or been expected to make the journey from rural Alberta, only to be told what they could have been told through Advice Request. “By the time the patient gets to us, they have exhausted all their options and are at a level where they need specialist care” says Dr. Schuler.

Providing advice to over 4,000 patients not only helps to keep the patient close to home, it also opens up nearly 1,500 appointments to patients who absolutely need to be in the care of the specialist. For a specialty that has historically faced barriers to access, this is a real win.

Despite the surge in Advice Requests within the first month of implementation, the requests have leveled off and Urology is receiving a more manageable 125 requests per week.

Thirteen Urologists at NAUC have been trained to receive and respond to Advice Requests and one thing rings true with them all: Advice Request is flexible. “How we’ve incorporated Advice Request into our day varies from practitioner to practitioner,” says Dr. Schuler, “some block off time in their day, others fit one or two in at the end of day or during lunch, I fit some in between cases in the OR. It is flexible, easy to learn and gives us the ability to provide care at times we traditionally do not have access to patients.”

Since Advice Request was implemented, patients in need of non-urgent advice have received that advice in a timely fashion. Patients in need of a referral have received that referral in a timely fashion. The advice has also provided support to the primary care physician, allowing them to optimize patient management within their community. This is a great benefit to both the patient and the physician. “I have seen education and change in some physician’s practices,” says Dr. Schuler, “Docs are learning from the advice and implementing suggested changes with future patients with similar symptoms.”

When asked what advice Dr. Schuler would give to doctors who are contemplating whether or not to implement Advice Request, his answer was simple, “Stop considering it. This is the natural progression to how we are going to work with patients, physicians and healthcare providers going forward.”