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Pediatric patient profile who comes to the ambulatory emergency Marin

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Background & Aim: The demand ambulatory urgent, presents a continuous and progressive growth, reaching now figures close to the system's saturation. This is not a purely national problem, as occurs in most developed countries. These services are the query option for acute pathology of patients, without waiting for an appointment. The ambulatory emergency physicians require solid knowledge, experience and the ability to make a rapid assessment. The aim of the paper is to describe the profile of the pediatric patient of ambulatory emergency care in Marin.

Methods: A cross sectional study was designed. Data from patients 0-15 years attending the ambulatory emergency of Marin, since 1st October to 31th December of 2015, were collected. Different parameters of affiliation were registered: demographics, symptoms, treatment and diagnosis. The data were treated statistically.

Results: 150 patients were analysed. The 56.7% were male, with a majority (47.3%) at the preschool and the least adolescents (4.7%). The most frequent reason for consultation was fever (20%), followed by respiratory diseases (17.3) and otolaryngology (17.3%). They had passed 12 to 24h from onset of symptoms in most cases (43.3%). The 85.3% of them had not been consulted before and the 55.3% had not taken any previous treatment. The antibiotic treatment was the most used (25.3%) followed by NSAID (22.7%). The 86% did not require later reference and 7.3% was required referral Hospital.

Conclusions: Primary care (PC) is an effective filter of hospital emergencies. PC urgent care is comparable to the consultation without an appointment, because of offering the possibility to consult any situation at the time when the population demands, regardless of severity. An improper use of these services motivates a lack of continuity care, lack of receipt of preventive practices, an increased health care costs, medicalization and difficulty in dealing with the really serious diseases.