

## TELEPHONE TRIAGE PELVIC FLOOR ASSESSMENT CLINIC

### Hypothesis / aims of study

In recent years there has been an increase in secondary care workload for patients with continence and pelvic floor symptoms. Nowadays we are required to provide patients with cost effective interventions within the healthcare setting. The Telephone triage assessment clinic (TTAC) is an initiative for patients seeking care for pelvic floor dysfunction that is aiming to both improve access to care and reduce waiting and costs to the health care setting.

TTAC enables accurate patient assessment, direct access to appropriate investigations and treatment efficiently based on existing best practice (1, 2).

The aim of this study was to assess the ongoing effectiveness of TTAC.

### Study design, materials and methods

This was a retrospective study between March 2013 and February 2015 of patients referred to the TTAC clinic after initial referral to the Colorectal Service. The TTAC was developed to identify patients with pelvic floor dysfunction. As part of the clinic a standardised and validated pelvic floor questionnaire, an information leaflet and a written protocol with a treatment pathway was created.

### Results

604 patients were booked into the TTAC, 69 patients were not available when called at the time of their TTAC (DNA rate 11%). Complete data was available for 374 patients at the time of writing this abstract.

The median St Mark's score was 12, Bowel incontinence score 15, Thompson constipation score 1, Bowel constipation score 9. The median bladder control assessment score was 3 and the median vaginal symptom score was 3.

Of the 374 patients, 300 (81%) were referred for conservative treatment, 120 (32%) were referred to a consultant clinic and of these 12.5% required a joint colorectal and urogynaecology or urology consultant review. 27 (7%) patients were referred directly for surgical intervention.

166 (44%) had bladder symptoms and 70 (19%) had vaginal symptoms. 47 patients had bowel bladder and vaginal symptoms.

The symptoms scores have also been correlated with findings from the pelvic floor investigations to enable efficient treatment of patients passed on the scores from the TTAC.

### Interpretation of results

Patients referred to the TTAC for bowel symptoms have significant bladder and vaginal symptoms. The scoring system allows us to direct patients to appropriate investigations and treatment.

### Concluding message

With the implementation of the successful TAC service in colorectal Pelvic floor, plans to roll out across all continence services (Urology, Urogynaecology) across secondary and primary care. TTAC continues to be effective, process now streamline. No attendance rates are low and minimal resources are required. There is a two week wait to be assessed in the TTAC once referrals are received.

The future plan is to integrate all referrals into one centre allowing the complete assessment of the pelvic floor between all specialities. This will allow patients to be assessed and directed to the appropriate investigations and treatments from one centre.

### Disclosures

**Funding:** None **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** Audit of clinical practice **Helsinki:** Yes **Informed Consent:** No