Is there a role for a nurse specialist within a tertiary referral stone unit?

Dickens N.1, Buchholz N.P.2, Masood J.2

^{1, 2}Barts and The London NHS Trust, Department of Urology, London, United Kingdom

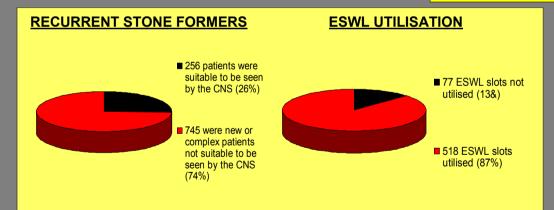
INTRODUCTION:

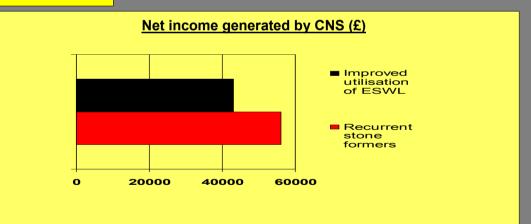
- •As a result of expanding workload, the stone unit at our tertiary referral centre has recently looked at ways of improving the service for our often complex patients.
- ■To meet these needs we have looked at introducing the role of an experienced nurse specialist (CNS) working to protocol.
- •Two patient groups were initially identified to be managed by the CNS, recurrent stone formers and patients undergoing extracorporeal lithotripsy (ESWL).

METHODS:

- Data was collected retrospectively from May 2008-April 2009 to identify how many recurrent stone formers had been seen by a doctor in clinic that would have been suitable to be seen by a CNS.
- ■Data was also collected for those patients who had undergone ESWL treatment in the same time period and had been booked for further treatment but had been declared stone free at the time of their appointment.

RESULTS:





CONCLUSIONS:

- •There is an important role for the CNS in managing recurrent stone formers and patients undergoing ESWL.
 - As a result of the CNS seeing recurrent stone formers in clinic, it frees up slots allowing doctors to see more complex patients. On average this will allow the doctors to see a further 6 8 new patients each clinic generating extra annual revenue for our trust of around £56,000.
 - •By implementing an ESWL follow-up clinic there will be a reduction in patients attending for further treatment that is not required, ensuring that all slots are utilised effectively and patients' treatment planned according to need.