

The Covid-safe Vulval Clinic: Audit of Outpatient Consultations during Covid-19

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Vulval Clinics Need Continuity:

- USC referrals
- VIN treatment and follow-up
- Known risk of neoplasia
- Remote consult not always suitable

Clinic Adaptations during Covid:

Patient Selection Refined:

- USC or potential harm if delayed
- If needing face to face care

Adaptations of Procedures:

- Spaced appointments
- Minimise staff
- Open windows

Retrospective Audit:

Patients contacted by phone:

- Up to 3 attempts to make contact
- Covid symptoms, tests, admissions
- Experience of the clinic

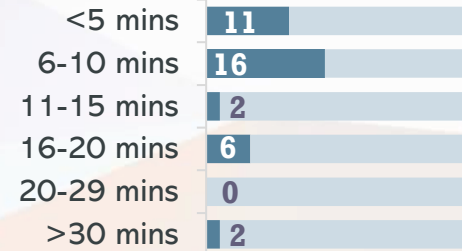
Clinical data from e-record:

- Diagnosis, biopsies
- Covid tests and results

Survey Results:



Waiting Times



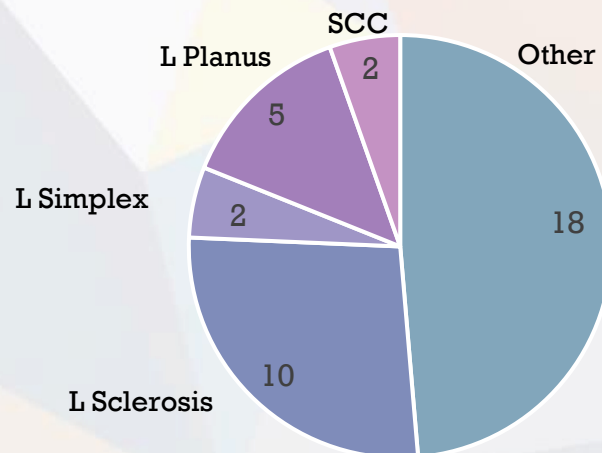
Age Distribution



Patient Satisfaction:



Diagnoses



30 new patients
21 follow-ups
8 patients biopsied

Conclusions:

No evidence of Covid infection related to clinic attendance

Caveat: small numbers

Spaced appointments → reduced waiting times.

High satisfaction ratings

Discussion:

Referral triage – would pictures improve specificity?

Can we improve waiting times?

Adapt procedures to support vulnerable individuals