

CASE STUDY – PEDIATRIC HOSPITAL

(0180)

THE NEED

Request from the metabolic service in a children's hospital serving a metropolitan area of approximately 7 million people. A solo biochemical geneticist of a busy metabolic practice needed coverage for at least one week (night call, Monday-Thursday 5pm-8am) and one weekend (24 hours, Friday 5pm to Monday 8am) per month, until a new biochemical geneticist could be recruited. The center is a major metabolic center and a referral center for the state's newborn screening program.

THE SERVICE

Physician support coverage was adjusted throughout the contract to meet fluctuating schedule needs of the hospital. The hospital's metabolic service designated a specific clinical geneticist who took first call during the specified times; VMP provided back-up coverage. That geneticist decided on a case-by-case basis whether or not back-up assistance was required. Most cases were discussed by phone with follow-up by email. Less commonly, the consult was very focused and conducted entirely by email. Access to hospital medical records was provided to the VMP consultant to be able to review lab results, specialty clinic notes, and online emergency protocols. A written summary of the consultation was provided after every Physician Support encounter.

Consultation requests included the evaluation and management of neonatal-onset disease (methylmalonic acidemia), the management of diagnosed patients with a wide range of acute inborn errors, including urea cycle disorders, organic acidemias, cobalamin defects, aminoacidopathies (PKU, maple syrup urine disease), glycogen storage diseases, fatty acid oxidation defects and carnitine transport defects, other metabolic myopathies, and defects of pyruvate metabolism, referrals from the newborn screening program, and the clinical work-up of (undiagnosed) patients with unexplained symptoms (e.g., vomiting, failure to thrive, hypotonia, seizures, cardiomyopathy) and/or biochemical derangements (e.g., hypoglycemia, metabolic acidosis, lactic acidosis, hyperammonemia).

THE OUTCOME

Physician support was provided for over a year, ending one month after a new metabolic clinician was hired. Service was restarted after a couple of yrs and is ongoing for over 2 years.

Comment by the Chief of Genetics at the end of the contract period:

"I learned about the services offered by VMP from a poster at an ACMG meeting. My division needed VMP's help to bridge a gap for a year while we were understaffed and waiting to hire a new physician. It is not possible to take night and weekend call without end as a single practitioner. We used a variety of methods to cover metabolic genetics night and weekend

call. The most robust was having VMP provide back-up to one of our clinical genetics colleagues. My colleague had experience with metabolic patients in the past, but he does not see metabolic patients in our clinic. This provided me a week per month of night and weekend call in which I was off duty. It was a relief to look forward to this time off and feel that my patients had good coverage. My colleague reports that he found it very easy to work with VMP, and he felt VMP was always responsive to his calls and questions – from the basic to the complex. They managed a new presentation of an organic acidemia together and many calls and hospital visits from our known metabolic patients.

We found it important for VMP to have direct access to our electronic medical record, so they could interpret data directly. VMP provided written documentation for complex management decisions that we could add to our record. Using VMP has been a good option for my team. Just like most occupations, metabolic geneticists change jobs over their careers, and our specialty is understaffed in many centers. Using VMP's service was a way to help prevent provider burnout for me while providing attentive and experienced care to our metabolic patients. I have enjoyed our relationship and would not hesitate to ask for their help again in the future if we need it.

“Again, thanks for keeping my service running. I do appreciate it.”