

Pharmacy First Service –Clinical Myth–Buster

- *'I have received a minor illness referral for a 1-year-old child with conjunctivitis, but I will have to reject this referral because I can't sell them chloramphenicol eye drops.'*

FALSE – Conjunctivitis is generally a self-limiting condition that will last 7–10 days and can usually be managed with regular bathing of the eye (lubricating drops may help to relieve the discomfort). Antibiotic drops are not recommended unless symptoms have been present for over 2 weeks.

It's an important part of Antimicrobial Stewardship that antibiotics are only supplied when necessary. More information and advice can be found [here](#).

- *'I have received a minor illness referral for an adult with an ear problem. The clinical pathway only covers children so I will have to reject this referral.'*

FALSE – Whilst adults are not included in the clinical pathway for Otitis Media, you can still do, (and claim for), a minor illness consultation. Ear conditions for all ages are included in the list of minor illness symptoms that can be referred to a community pharmacist under Pharmacy First. The clinical pathway for Acute Otitis Media only covers children because they are the age group most likely to suffer from this condition.

Earache is generally a self-limiting condition that can be managed with pain relief. See further guidance on the [NHS website](#).

You are not obliged to use your otoscope to look in an adult's ear (as this is not a clinical pathway consultation), but you may choose to do so as part of your minor illness consultation. VirtualOutcomes have a good [ENT](#) learning module that covers management of minor ear conditions.

- *'I have received a minor illness referral for a patient with oral thrush but Daktarin oral gel is unavailable so I will have to reject the referral or escalate the patient back to the surgery.'*

FALSE – Whilst over-the-counter treatment options for this condition are limited, you could recommend that the patient try chlorhexidine mouthwash, as this product is licensed for treatment of oral thrush. If that treatment is unsuitable, e.g. the patient is too young to use a mouthwash, then they may have to be escalated back to the surgery. If the patient must be escalated back, complete the consultation providing appropriate information in the clinical notes section to let the surgery know why the referral has been escalated back (this lets the practice know so that they don't send further referrals for this condition). Don't forget, consultations that result in the patient being escalated back to the GP practice can be claimed for; the outcome should be recorded as "urgent escalation back to GP" or "non-urgent signposting back to GP" and appropriate notes made covering the reasons why.

- *'I have been sent a minor illness referral for a 3-year-old child with a sore throat. As the child is outside the age range for the Sore Throat clinical pathway, I will have to reject the referral.'*

FALSE – Whilst the child is too young to meet the criteria for a clinical pathway consultation, you can still do, (and claim for), a minor illness consultation. Most sore throats in under 5's are viral and will be self-limiting. You can provide advice on self-care and safety-netting, should the condition worsen. After examining the child, if you think they need escalating back to the surgery, you should complete the consultation and follow your usual Pharmacy First escalation process. Further information about sore throats in young children can be found [here](#).

- *'I have received a minor illness referral for a patient with sinusitis, but they have only had symptoms for 4 days, so I will have to reject the referral as they do not meet the criteria for a clinical pathway consultation.'*

FALSE – You could provide a minor illness consultation. The patient can be given self-care advice on managing their condition and advised to come back and see you if they still have symptoms after 10 days. You could then see them as a walk-in clinical pathway patient. Don't forget to claim for providing the initial minor illness consultation (if the patient returns because their symptoms have not resolved and they subsequently meet the criteria for the clinical pathway, you can claim again for a walk-in consultation).