

- *'I have received a Minor Illness referral for a 1-year-old child with conjunctivitis so I will have to refer them back to the surgery because I can't sell them chloramphenicol eye drops.'*

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

It's an important part of Antimicrobial Stewardship that we only supply antibiotics 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 refer this patient back to the surgery.'*

FALSE – Ear conditions for all ages have always been part of the Minor Illness referrals (even under the previous Community Pharmacy Consultation Service). 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 [here](#). 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, and to provide reassurance to the patient.

Virtual Outcomes has a good ENT learning module [here](#) that covers management of minor ear conditions.

- *'I have been sent a Minor Illness referral for a 3-year-old child with a sore throat. I have rejected the referral as the child is outside the age range for the Sore Throat Clinical Pathway.'*

FALSE – Whilst the child is too young to meet the criteria for a Clinical Pathway consultation, you can still do a Minor Illness consultation for this patient. 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 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 have rejected the referral as I am unable to supply any medication until they have had symptoms for 10 days.'*

FALSE – This patient could still be seen for a Clinical Pathway consultation as all patients with sinusitis symptoms now pass the Gateway Point on the acute sinusitis pathway, regardless of how long they have had symptoms for. They 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 conduct a further consultation for them as a walk-in clinical pathway patient.

- *'I have completed a Pharmacy First consultation for an electronically referred patient with a suspected infected insect bite. It was only just over 48 hours after they received the bite and too early to be sure the bite was infected. I advised self-care and to come back if the bite worsened or did not improve after 3 days. I now must keep the record open for 3 days and complete it if the patient does not return after that time.'*

FALSE – The consultation record should be completed on the day you have seen the patient. If they return, this would be a separate episode of care, and a new Pharmacy First consultation record should be created (provided they meet the Gateway criteria). There is no guarantee that a patient will return to the same pharmacy, or see the same pharmacist, so each episode of care should have its own record. This also ensures that details about the consultation are passed onto the GP Practice and added to the patient record in a timely manner.

The same applies to any clinical pathway conditions where the patient is asked to return if their condition worsens or does not improve in the advised time frame.