A Study on Effects of Late Arrival of Doctors to Out Patient Department in a Tertiary Care Teaching Hospital

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Abstract: Outpatient department is the mirror of the hospital, which reflects overall functioning of the hospital, being the first point of contact between the patient and hospital staff. Nowadays majority of hospitals are facing long waiting time that is resulting in patient dissatisfaction. Waiting for consultation and getting investigations done in the hospital is one of the main reason behind patient does not want to avail the services of hospital.

Methodology: cross sectional and questionnaire based.

Results and observations: Study was conducted in five departments and details regarding number of registrations, No of consultations by doctor hourly, Average time spent by doctor with each patient, Time taken from registration to consultation and patient satisfaction was observed.

Recommendations: If doctors arrive at 8 am most of the patient load will be cleared as there will be no pooling of patients, who had done registrations between 7 am to 8 am.

I. Introduction

The hospital industry is an aggregation of sectors within the economic system that provides goods and services to treat patients with curative, preventive, rehabilitative, and palliative care. Major services include inpatient hospital care (60%) and outpatient services that typically don't require an overnight stay (40%).

Methodology: The study is cross sectional in nature and sampling technique used were census data and purposive sampling. During the study both qualitative data like factors responsible for long waiting time in OPD, its impact on patient satisfaction and quantitative data like average waiting time of the patients in OPD, percent distribution of satisfaction score given by the patients has been collected. The data has been collected through face to face interview with the help of semi-structured questionnaire and to estimate the average waiting time daily reporting of in-time and out-time of patients coming in the has been measured. The study area is Nizam’s institute of medical sciences, panjagutta a tertiary care teaching hospital

Data collection and analysis: study was conducted in five departments cardiology, surgical gastroenterology, medical gastroenterology, pulmonology and urology. Following data is collected
1. No of registrations
2. No of consultations by doctor hourly
3. Average time spent by doctor with each patient
4. Time taken from registration to consultation

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2. No of consultations by doctor hourly

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3. Average time spent by doctor with each patient (in minutes)

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4. Time taken from registration to consultation (in minutes)

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II. Results and Recommendations

And some patients are dissatisfied with the waiting time at other service areas related to OPD like blood and urine Sample collection, ultrasound, CT scan, MRI scan.

One of the main cause for long waiting period in OPD is due to late arrival of doctors to OPD. During our study most of the doctors came to OPD after 9am due to which there is long waiting period for consultation.

Quality of care

Because of late arrivals of doctors to OPD quality of care is reduced during peak hours due to heavy patient load.

Patient satisfaction

Every patient attending the hospital is responsible for spreading the good will of the hospital and therefore satisfaction of patient attending the hospital is equally important for hospital management.

- Only few residents are available during early hours
- Professors and HODs are available in OPD mostly after 10:30 am
- Most of the consultants leave OPD by 12:30pm
- Again only few residents will be available after 12:30pm
- Patients who consulted doctors between 8am to 10 am are 50% satisfied
- 70% patients are satisfied between 10am to 12pm
- But only 40% patients are satisfied after 12 pm
- Patients coming to OPD after 11 am, for them cross consultations were done next day, due to which patients are dissatisfied and causing lot of burden for the patients coming from long distances to hospital.
Following are some other causes for long waiting period

**Waiting time**
Long waiting time for consultations
Doctors arriving late
Doctors in procedure rooms and in emergency room

**Radiology**
Availability of only one ultrasound machine for emergency and specialty block.
Patients are not informed aptly about the further process after the procedure has been done.

**Monitoring patients**
Which patient is likely to be in, for the consultation not known at times?
Presence of the patient inside the doctor’s room is not known.

**Billing queue**
Long process for billing.
No queue management when crowded.

**Signage’s**
Lack of signage’s indicating departments.

### III. Conclusions

If doctors arrive at 8 am…most of the **patient load will be cleared as there will be no pooling of patients**, who had done registrations between 7am to 8 am.

It is suggested that if resident is available at evening OPD for at least 2 hours then morning OPD patient investigation reports can be reviewed which **will reduce the 30%- 40% next OPD**.

Only 50% of the patients are satisfied with the waiting time at OPD and it should be taken as a bottleneck of the hospital which affects the efficiency and overall functioning of the system. Every patient attending the hospital is responsible for spreading the good image of the hospital and therefore satisfaction of patients attending the hospital is equally important for hospital management.

### References


[7]. Kothari CR. Research Methodology: Methods and Techniques. New Age Publications; 2007
