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Characteristics of general practices involved in undergraduate medical teaching.

Accession number & update

11360701 Medline R 20010101.

Source

The British journal of general practice : the journal of the Royal College of General Practitioners, {Br-J-Gen-Pract}, May 2001, vol. 51, no. 466, p. 371-4, ISSN: 0960-1643.

Author(s)

Gray-R-W, Carter-Y-H, Hull-S-A, Sheldon-M-G, Ball-C.

Author affiliation

Department of General Practice and Primary Care, St Bartholomew's and the Royal London School of Medicine and Dentistry, Queen Mary and Westfield College, London.

Abstract

BACKGROUND: The movement of medical education into the community has accelerated the development of a new model of general practice in which core clinical services are complemented by educational and research activities involving the whole primary care team. **AIM:** To compare quality indicators, workload characteristics, and health authority income of general practices involved in undergraduate medical education in east London with those of other practices in the area and national figures where available. **DESIGN OF STUDY:** A comprehensive survey of undergraduate and postgraduate clinical placements and practice-based research activity within general practice. **SETTING:** One-hundred and sixty-one practices based in East London and the City Health Authority (ELCHA). **METHOD:** Cross-sectional survey comparing routinely-collected information on practice resources, workload, income, and performance between teaching and non-teaching practices. **RESULTS:** In east London, teaching practices are larger partnerships with smaller list sizes, higher staff costs, and better quality premises than non-teaching practices. Teaching practices demonstrate significantly better performance on quality indicators, such as cervical cytology coverage and prescribing indicators. Patient-related health authority income per whole time equivalent (WTE) general practitioner (GP) is significantly lower among teaching practices. A multiple regression analysis was used to explore the association between teaching status and income. Eighty-eight per cent of the variation in patient-related income could be explained by the combination of list size, list turnover, removals at doctor's request, quality of premises, and immunisation and cytology rates. **CONCLUSION:** This study demonstrates that practice involvement in undergraduate education in east London is associated with higher scores on a range of organisational and performance quality indicators. The lower patient-related income of teaching practices is associated with smaller list sizes and may only be partially replaced by teaching income. Lower vacancy rates suggest that teaching practices are more attractive to doctors seeking partnerships in east London.

Descriptors

EDUCATION-MEDICAL-GRADUATE/EC (economics), *OG (organization & administration);
EDUCATION-MEDICAL-UNDERGRADUATE/EC (economics), *OG (organization & administration);
FAMILY-PRACTICE/EC (economics), ED (education), *OG (organization & administration).
EMPLOYMENT/SN (statistics & numerical data);
HUMANS;
INCOME;
LONDON;
PARTNERSHIP-PRACTICE/OG (organization & administration), ST (standards);
TEACHING/OG (organization & administration);
WORKLOAD.

Language

English.

Publication type

Comparative–Study, Journal–Article.

Journal subset

IM.

Country of publisher

England.

Journal code

0009005323.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

2001.

Publication date

20010500.

Entry date

Date created: 20010521

Date completed: 20010621

Date revised: 20061115.

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Linking general practices to the medical schools: qualitative issues.

Accession number & update

10972758 Medline R 20000101.

Source

Medical education, {Med–Educ}, Sep 2000, vol. 34, no. 9, p. 776–8, ISSN: 0308–0110.

Author(s)

Gray–R–W, Carter–Y–H, Edwards–M, Falshaw–M, Gantley–M–M, Hagdrup–N–A, **Sheldon–M–G.**

Author affiliation

Department of General Practice and Primary Care, St Bartholomew's and the Royal London School of Medicine and Dentistry, Queen Mary and Westfield College, London, UK.

Abstract

The University Linked Practices (ULP) programme links general practices involved in undergraduate medical education with computer services provided through the school of medicine and dentistry. In–depth interviews were conducted with 26 staff involved in teaching undergraduate medical students in 15 general practices across east London and Essex. The interview schedule focused on the use of the computer, IT experience and training needs and the use of the computer network as a resource in undergraduate teaching. It is important to work with curriculum planners to ensure that computers are fully integrated into new courses.

Descriptors

COMPUTER–LITERACY/*;

EDUCATION–MEDICAL/*MT (methods);

FAMILY–PRACTICE/*ED (education).

EDUCATION–MEDICAL–UNDERGRADUATE/MT (methods);

GREAT–BRITAIN;

HUMANS;

INFORMATION–SERVICES;

LOCAL–AREA–NETWORKS.

Language

English.

Publication type

Journal–Article, Research–Support–Non–US–Govt.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007605655.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

2000.

Publication date

20000900.

Entry date

Date created: 20001005

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Why? What? and How? IT provision for medical students in general practice.

Accession number & update

10354339 Medline R 19990101.

Source

Medical education, {Med-Educ}, Jul 1999, vol. 33, no. 7, p. 537-41, ISSN: 0308-0110.

Author(s)

Hagdrup-N-A, Edwards-M, Carter-Y-H, Falshaw-M, Gray-R-W, **Sheldon-M-G.**

Author affiliation

Department of General Practice and Primary Care, St Bartholomew's and the Royal London School of Medicine and Dentistry, Medical Sciences Building, Queen Mary and Westfield College, Mile End Road, London E1 4NS, UK.

Abstract

OBJECTIVES: The aim of this paper is to discuss the increasing use of computers in undergraduate medical education and explore the why, what and how of providing IT facilities to undergraduate medical students when they are on placement in general practice. Adequate computing facilities are usually available within hospitals and medical schools, however, major changes are taking place in undergraduate education resulting in more teaching being undertaken in the community. Students will therefore need access to comparable facilities whilst in primary care settings in order for their training not to be compromised. SETTING: This paper describes one initiative addressing this need: the University Linked Practices (ULP) project in the Department of General Practice and Primary Care at St. Bartholomew's and the Royal London School of Medicine and Dentistry. DESIGN: We discuss the ways in which computers are currently being used in medical education and discuss some of the merits and drawbacks that are associated with this increasing drive to computerization.

Descriptors

COMPUTER-LITERACY/*;
COMPUTER-ASSISTED-INSTRUCTION/*;
EDUCATION-MEDICAL-UNDERGRADUATE/*MT (methods);
FAMILY-PRACTICE/*ED (education).
COMPUTER-USER-TRAINING;
GREAT-BRITAIN;
HUMANS;
INTERNET.

Language

English.

Publication type

Journal–Article, Research–Support–Non–US–Govt.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007605655.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1999.

Publication date

19990700.

Entry date

Date created: 19991021

Date completed: 19991021

Date revised: 20061115.

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A nurse practitioner as the first point of contact for urgent medical problems in a general practice setting.

Dialog eLinks

Full text available at



Accession number & update

09476082 Medline R 19990101.

Source

Family practice, {Fam–Pract}, Dec 1997, vol. 14, no. 6, p. 492–7, ISSN: 0263–2136.

Author(s)

Myers–P–C, Lenci–B, **Sheldon–M–G.**

Author affiliation

Western Road Medical Centre, Essex, UK.

Abstract

OBJECTIVES: The aim of this study was to examine the suitability of nurse practitioners for assessing and managing urgent clinical problems presenting in primary care. **METHODS:** Patients registered at a suburban group practice presenting with acute medical problems were offered the choice of seeing a GP or a nurse practitioner. The outcomes of 1000 consultations were analysed by recording the repeat consultation rate, the prescription–issue rate and the rate of referral to secondary care, as well as investigating patient satisfaction and the number of dysfunctional consultations and misdiagnoses. **RESULTS:** Patients reported a high level of satisfaction with nurse practitioner consultations, and there were no recorded instances of medical sequelae due to poor diagnosis or mismanagement. Nurse and doctors saw patients with similar age and sex distributions, but the results suggested that there was a significant difference between the morbidity of problems seen. There was also a difference in the outcomes of repeat consultation rate and the prescription issue rate, although there was little difference in the rate of referral for secondary care. **CONCLUSION:** As patients expressed a high level of satisfaction with the nurse practitioner, this suggests that given the choice, patients in primary care can safely and effectively 'self triage' themselves between GPs and nurse practitioners.

Descriptors

FAMILY–PRACTICE/*;

NURSE-PRACTITIONERS/*;
NURSING-PROCESS/*;
OUTCOME-ASSESSMENT-HEALTH-CARE/*.
FEMALE;
HEALTH-SERVICES-RESEARCH;
HUMANS;
MALE;
NURSE-PATIENT-RELATIONS;
PATIENT-ACCEPTANCE-OF-HEALTH-CARE;
REFERRAL-AND-CONSULTATION;
STATISTICS-NONPARAMETRIC.

Language

English.

Publication type

Journal-Article, Research-Support-Non-US-Govt.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0008500875.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1997.

Publication date

19971200.

Entry date

Date created: 19990806

Date completed: 19990806

Date revised: 20061115.

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Patients in east London seem happy to give GPs consent for training.

Dialog eLinks

Full text available at



Accession number & update

09564013 Medline R 19980101.

Source

BMJ (Clinical research ed.), {BMJ}, 2 May 1998, vol. 316, no. 7141, p. 1391, ISSN: 0959-8138.

Author(s)

Gantley-M, Rickets-M, Sheldon-M, Carter-Y.

Descriptors

FAMILY-PRACTICE/*ED (education);

INFORMED-CONSENT/*.

CONFIDENTIALITY;

HUMANS;

LONDON;

PATIENT-SATISFACTION;

PHYSICIAN-PATIENT-RELATIONS;

REFERRAL-AND-CONSULTATION.

Language

English.

Publication type

Letter.

Journal subset

AIM; IM.

Country of publisher

ENGLAND.

Journal code

0008900488.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1998.

Publication date

19980502.

Entry date

Date created: 19980603

Date completed: 19980603

Date revised: 20041117.

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Spirituality, healing and medicine.

Accession number & update

01586536 Medline R 19920101.

Source

The British journal of general practice : the journal of the Royal College of General Practitioners, {Br-J-Gen-Pract}, Jan 1992, vol. 42, no. 354, p. 38, ISSN: 0960-1643.

Author(s)

Sheldon-M-G.

Descriptors

MENTAL-HEALING/*.

RESEARCH.

Language

English.

Publication type

Letter.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0009005323.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1992.

Publication date

19920100.

Entry date

Date created: 19920625
Date completed: 19920625
Date revised: 20001218.

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The Christian approach to whole-person medicine.

Accession number & update

02559995 Medline R 19900101.

Source

The Journal of the Royal College of General Practitioners, {J-R-Coll- Gen-Pract}, Apr 1989, vol. 39, no. 321, p. 166, ISSN: 0035-8797.

Author(s)

Sheldon-M-G.

Abstract

A working party with representatives from the Royal College of General Practitioners and the Churches' Council for Health and Healing has produced a report on the Christian approach to whole-person medicine. This emphasizes the importance of including the spiritual dimension of man in health care problems and urges closer cooperation between health care professionals and Christian ministers. Some of the difficulties inherent in this approach are highlighted in this paper and some proposals for further progress outlined.

Descriptors

CHRISTIANITY/*;
HOLISTIC-HEALTH/*.
HUMANS;
RELIGION-AND-MEDICINE.

Language

English.

Publication type

Journal-Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007503107.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1989.

Publication date

19890400.

Entry date

Date created: 19900322
Date completed: 19900322
Date revised: 20041117.

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The health of pre-school children and the response to illness of single-parent families.

Accession number & update

03641809 Medline R 19870101.

Source

Health visitor, {Health-Visit}, Nov 1986, vol. 59, no. 11, p. 337-9, ISSN: 0017-9140.

Author(s)

Jennings-A, **Sheldon-M-G.**

Descriptors

CHILD-HEALTH-SERVICES/*;
FAMILY-CHARACTERISTICS/*;
MORBIDITY/*.
CHILD-PRESCHOOL;
ENGLAND;
HUMANS;
RESPIRATORY-TRACT-INFECTIONS/EP (epidemiology);
SINGLE-PERSON.

Language

English.

Publication type

Journal-Article.

Journal subset

N.

Country of publisher

ENGLAND.

Journal code

017320470R.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1986.

Publication date

19861100.

Entry date

Date created: 19870219

Date completed: 19870219

Date revised: 20041117.

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Opportunities for anticipatory care with the elderly.

Accession number & update

03944547 Medline R 19860101.

Source

The Journal of family practice, {J-Fam-Pract}, Feb 1986, vol. 22, no. 2, p. 141-5, ISSN: 0094-3509.

Author(s)

Hedley-R, Ebrahim-S, **Sheldon-M.**

Abstract

Contacts made by the elderly in a group general practice were monitored over seven months to describe how the elderly use services and to consider how a program of anticipatory care might be instituted. Eighty-four percent (1,562) of the patients aged over 65 years were seen during this period, and there were 4,315 contacts logged. Contact rates and the proportion of home visits were higher for patients

aged over 75 years. More than three quarters of contacts were with a physician, one fifth with a nurse, and only 11 (0.3 percent) were with a health visitor. Referral and investigation rates were very low. Almost three quarters of elderly patients contacted were functionally independent. The most common diagnoses were osteoarthritis, hypertension, heart failure, and depression. Prescribing levels were relatively high, but people aged over 75 years were given fewer medicines than those aged 65 to 74 years. There is great scope for case finding by general practitioners provided good use is made of each contact. Health visitor case finding or screening would require either a major change in existing work patterns or recruitment of extra staff.

Descriptors

HEALTH-SERVICES-FOR-THE-AGED/*UT (utilization);
PRIMARY-HEALTH-CARE/*.
ACTIVITIES-OF-DAILY-LIVING;
AGED;
COMMUNITY-HEALTH-NURSING/UT (utilization);
FEMALE;
GREAT-BRITAIN;
HOUSE-CALLS/UT (utilization);
HUMANS;
MALE;
PRESCRIPTIONS-DRUG;
PREVENTIVE-HEALTH-SERVICES;
PUBLIC-HEALTH-NURSING/UT (utilization);
REFERRAL-AND-CONSULTATION/UT (utilization).

Language

English.

Publication type

Journal-Article, Research-Support-Non-US-Govt.

Journal subset

AIM; IM.

Country of publisher

UNITED-STATES.

Journal code

0007502590.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1986.

Publication date

19860200.

Entry date

Date created: 19860310

Date completed: 19860310

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Review of the health of children in one-parent families.

Accession number & update

03908668 Medline R 19860101.

Source

The Journal of the Royal College of General Practitioners, {J-R-Coll- Gen-Pract}, Oct 1985, vol. 35, no. 279, p. 478-83, 28 refs, ISSN: 0035-8797.

Author(s)

Jennings-A-J, **Sheldon-M-G.**

Descriptors

HEALTH/*;
HEALTH-STATUS/*;
PARENTS/*;
SINGLE-PERSON*.
ADOLESCENT;
CHILD;
CHILD-PRESCHOOL;
FEMALE;
GREAT-BRITAIN;
HUMANS;
INFANT;
INFANT-NEWBORN;
MALE.

Language

English.

Publication type

Journal-Article, Review.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007503107.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1985.

Publication date

19851000.

Entry date

Date created: 19860214

Date completed: 19860214

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The doctor, the patient and the computer.

Accession number & update

06504820 Medline R 19850101.

Source

The Practitioner, {Practitioner}, Dec 1984, vol. 228, no. 1398, p. 1121-4, ISSN: 0032-6518.

Author(s)

Sheldon-M-G.

Descriptors

COMPUTERS/*;
FAMILY-PRACTICE/*;
MEDICAL-RECORDS*.
CONFIDENTIALITY;
FEMALE;

HUMANS;
PHYSICIAN-PATIENT-RELATIONS.

Language

English.

Publication type

Journal-Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0000404245.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1984.

Publication date

19841200.

Entry date

Date created: 19850122

Date completed: 19850122

Date revised: 20041117.

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A general practice evaluation of pivmecillinam given twice daily as a treatment for acute urinary tract infection.

Accession number & update

06504945 Medline R 19850101.

Source

Pharmatherapeutica, {Pharmatherapeutica}, 1984, vol. 4, no. 1, p. 25-31, ISSN: 0308-051X.

Author(s)

Skinner-J-L, Venables-T-L, **Sheldon-M-G**.

Abstract

In a multi-centre study in general practice, 292 female patients with acute urinary tract infection received a 5-day course of pivmecillinam at a dosage of either 200 mg or 400 mg twice-daily. Positive bacteriological cultures were obtained from 64 (31%) of 206 patients for whom bacteriological data was complete, and bacteriological cures were obtained in all 38 patients in the lower dose group and 22 (85%) of the 26 patients in the higher dose group. An equally good clinical response was seen with both treatments and the mean symptom score (maximum possible 15) was reduced from 7.46 to 0.73. Side-effects were reported for 7 (4%) patients in the lower dose group and 11 (10%) patients in the higher dose group. Two patients in each group ceased treatment due to nausea, which was the most frequently reported complaint.

Descriptors

AMDINOCILLIN/*TU (therapeutic use);

AMDINOCILLIN-PIVOXIL/AD (administration & dosage), AE (adverse effects), *TU (therapeutic use);

URINARY-TRACT-INFECTIONS/*DT (drug therapy), MI (microbiology).

ADOLESCENT;

ADULT;

BACTERIURIA/DT (drug therapy), MI (microbiology);

FEMALE;

HUMANS;
MIDDLE-AGED.

CAS Registry numbers

32886-97-8 (Amdinocillin-Pivoxil);
32887-01-7 (Amdinocillin).

Language

English.

Publication type

Clinical-Trial, Controlled-Clinical-Trial, Journal-Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007606274.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1984.

Publication date

19840000.

Entry date

Date created: 19850104
Date completed: 19850104
Date revised: 20041117.

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Low levels of ill health among elderly non-consulters in general practice.

Accession number & update

06437516 Medline R 19840101.

Source

British medical journal (Clinical research ed.), {Br-Med-J-Clin-Res-Ed }, 10 Nov 1984, vol. 289, no. 6454, p. 1273-5, ISSN: 0267-0623.

Author(s)

Ebrahim-S, Hedley-R, **Sheldon-M.**

Abstract

The characteristics of random samples of elderly patients (over 65 years of age), designated as consulters (n = 200) and non-consulters (n = 196), in a group general practice were compared using a postal questionnaire that was validated by comparison with findings by general practitioners in a random sample of 58 responders. A response rate of 90% was obtained, and all non-responders were visited by their general practitioner. The questionnaire had a sensitivity of 79% and a specificity of 82% when compared with general practitioner findings. The use of hospital and social services by non-consulters was low in this practice. Measures of disability and state of health showed that non-consulters were a fit group of the aged. Case finding for problems among elderly people should initially be confined to consulters, who have a high prevalence of problems. Non-consulters are a low risk group that can be assessed only with special effort and extra resources. Once an effective case finding system has been developed it might then be reasonable to consider ways of finding the few patients who have problems but do not consult their doctor.

Descriptors

AGED/*;
FAMILY-PRACTICE/*MT (methods);

HEALTH/*;
HEALTH-STATUS/*.
ENGLAND;
HUMANS;
MORBIDITY;
PATIENT-ACCEPTANCE-OF-HEALTH-CARE;
QUESTIONNAIRES.

Language

English.

Publication type

Comparative-Study, Journal-Article, Research-Support-Non-US-Govt.

Journal subset

AIM; IM.

Country of publisher

ENGLAND.

Journal code

0008302911.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1984.

Publication date

19841110.

Entry date

Date created: 19841227

Date completed: 19841227

Date revised: 20061115.

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Use of deputising services and night visit rates in general practice.

Accession number & update

06432147 Medline R 19840101.

Source

British medical journal (Clinical research ed.), {Br-Med-J-Clin-Res-Ed }, 25 Aug 1984, vol. 289, no. 6443, p. 474-6, ISSN: 0267-0623.

Author(s)

Sheldon-M-G, Harris-S-J.

Abstract

Examining all of the claim forms for night visits submitted to the Nottingham Family Practitioner Committee over a three month period allowed us to calculate the night visit rate for all 184 practices in Nottinghamshire. To take all of the practices together the mean night visit rate (covering all visits requested and made between 11 00 pm and 7 00 am) was 15.5 visits per 1000 patients a year, range 1.2 to 46.1. Whether or not a deputising service is used accounted for 12% of the total variance detected, while the other factors studied, such as area of practice, patient list size, and number of partners, accounted for approximately 1% each. The local deputising service responds to 97% of night calls with a visit to the patient, whereas the patient's own doctor is more likely to provide advice over the telephone. The ability to provide telephone advice, however, will vary according to the breakdown of the practice by age and social class.

Descriptors

FAMILY-PRACTICE/*MA (manpower);

HOUSE-CALLS/*.

ENGLAND;
NIGHT-CARE;
TIME-FACTORS.

Language

English.

Publication type

Journal-Article.

Journal subset

AIM; IM.

Country of publisher

ENGLAND.

Journal code

0008302911.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1984.

Publication date

19840825.

Entry date

Date created: 19841001

Date completed: 19841001

Date revised: 20001218.

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The accuracy of age-sex registers in general practice.

Accession number & update

06737364 Medline R 19840101.

Source

The Journal of the Royal College of General Practitioners, {J-R-Coll- Gen-Pract}, May 1984, vol. 34, no. 262, p. 269-71, ISSN: 0035-8797.

Author(s)

Sheldon-M-G, Rector-A-L, Barnes-P-A.

Descriptors

FAMILY-PRACTICE/*;
REGISTRIES/*ST (standards).
ENGLAND;
HUMANS;
RESEARCH.

Language

English.

Publication type

Journal-Article, Research-Support-Non-US-Govt.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007503107.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1984.

Publication date

19840500.

Entry date

Date created: 19840813

Date completed: 19840813

Date revised: 20061115.

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A review of studies of decision-making in general practice.

Accession number & update

06717162 Medline R 19840101.

Source

Medical informatics = Médecine et informatique, {Med-Inform-Lond}, Jan-Mar 1984, vol. 9, no. 1, p. 45-53, ISSN: 0307-7640.

Author(s)

Brooke-J-B, Rector-A-L, **Sheldon-M-G.**

Descriptors

DECISION-MAKING/*;

FAMILY-PRACTICE/*.

COGNITION;

DIAGNOSIS;

HUMANS;

MODELS-PSYCHOLOGICAL.

Language

English.

Publication type

Comparative-Study, Journal-Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007612096.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1984.

Publication date

19840100.

Entry date

Date created: 19840607

Date completed: 19840607

Date revised: 20061115.

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Auditing the management of otitis media in general practice.

Accession number & update

06889258 Medline R 19830101.

Source

The Practitioner, {Practitioner}, Jun 1983, vol. 227, no. 1380, p. 1017–25, ISSN: 0032–6518.

Author(s)

Sheldon–M–G.

Descriptors

FAMILY–PRACTICE/*ST (standards);
MEDICAL–AUDIT/*;
OTITIS–MEDIA/*TH (therapy).
GREAT–BRITAIN;
HUMANS.

Language

English.

Publication type

Journal–Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0000404245.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1983.

Publication date

19830600.

Entry date

Date created: 19831008

Date completed: 19831008

Date revised: 20041117.

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Controlled trial of faecal occult blood testing in the detection of colorectal cancer.

Accession number & update

06134884 Medline R 19830101.

Source

Lancet, {Lancet}, 2 Jul 1983, vol. 2, no. 8340, p. 1–4, ISSN: 0140–6736.

Author(s)

Hardcastle–J–D, Farrands–P–A, Balfour–T–W, Chamberlain–J, Amar–S–S, **Sheldon–M–G.**

Abstract

20 525 patients from general practitioners' lists were randomly allocated into test and control groups. The 10 253 test subjects were invited to perform haemoccult faecal occult blood testing over 3 days. 3613 (36 . 8%) of the 9807 who received their invitations completed the test. Compliance was improved by direct invitation from the general practitioner and by prior health education by letter or interview. 77 people (2 . 1%) had a positive test result, and 50% of these on investigation had neoplastic disease—12 had invasive carcinomas (9 Dukes' stage A, 2 stage B, 1 stage C) and 27 had 40 adenomas (12 over 2 cm, 2 of which contained areas of severe dysplasia). In the year following the screening test 1 carcinoma (stage

C) has presented in the group which accepted the test, and 10 carcinomas (4 stage B, 4 stage C, 2 stage D) have presented in the control group. This represents a 3.6 times greater detection rate per 1000 persons in the test group than in the control group. Only 8 adenomas have presented in the control and non-responding groups. Fiberoptic sigmoidoscopy identified the 10 carcinomas within its range and 39 of the 40 adenomas. Double-contrast barium enema identified only 9 of the 12 carcinomas and 24 (62%) of the 40 adenomas. All 3 carcinomas not identified by barium enema were polypoid Dukes' stage-A lesions.

Descriptors

COLONIC-NEOPLASMS/*DI (diagnosis), PA (pathology);
OCCULT-BLOOD/*;
RECTAL-NEOPLASMS/*DI (diagnosis), PA (pathology).
ADENOMA/DI (diagnosis), PA (pathology);
AGED;
CARCINOMA/DI (diagnosis), PA (pathology);
CLINICAL-TRIALS-AS-TOPIC;
FIBER-OPTICS;
HUMANS;
MASS-SCREENING;
MIDDLE-AGED;
NEOPLASM-STAGING;
RANDOM-ALLOCATION;
SIGMOIDOSCOPY.

Language

English.

Publication type

Clinical-Trial, Journal-Article, Randomized-Controlled-Trial,
Research-Support-Non-US-Govt.

Journal subset

AIM; IM.

Country of publisher

ENGLAND.

Journal code

002985213R.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1983.

Publication date

19830702.

Entry date

Date created: 19830811

Date completed: 19830811

Date revised: 20071115.

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Medical audit in general practice. Butterworth Prize Essay 1981.

Accession number & update

07175792 Medline R 19830101.

Source

The Journal of the Royal College of General Practitioners. Occasional paper, {J-R-Coll-Gen-Pract-Occas-Pap}, 1982, vol. 20, p. 1-21, ISSN: 0309-6300.

Author(s)

Sheldon-M-G.

Descriptors

FAMILY-PRACTICE/*ST (standards);
MEDICAL-AUDIT/*.
GREAT-BRITAIN;
PEER-REVIEW;
QUALITY-OF-HEALTH-CARE.

Language

English.

Publication type

Journal-Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007805797.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1982.

Publication date

19820000.

Entry date

Date created: 19830225

Date completed: 19830225

Date revised: 20001218.

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Giving patients a copy of their computer medical record.

Accession number & update

07097630 Medline R 19820101.

Source

The Journal of the Royal College of General Practitioners, {J-R-Coll- Gen-Pract}, Feb 1982, vol. 32, no. 235, p. 80-6, ISSN: 0035-8797.

Author(s)

Sheldon-M-G.

Abstract

General note: KIE BoB Subject Heading: patient access to records. Full author name: Sheldon, MG.

Descriptors

Major MeSH Headings:
MEDICAL-RECORDS/*;
PATIENT-ACCESS-TO-RECORDS/*;
PATIENT-RIGHTS/*.
Minor MeSH Headings:
COMPUTERS;
CONSUMER-SATISFACTION;
HUMANS;
PATIENT-PARTICIPATION.
Minor Keywords:

Empirical-Approach;
Professional-Patient-Relationship.

Language

English.

Publication type

Journal-Article, Research-Support-Non-US-Govt.

Journal subset

E; IM.

Country of publisher

ENGLAND.

Journal code

0007503107.

Information provider

NLM. KIE 22188.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1982.

Publication date

19820200.

Entry date

Date created: 19820924

Date completed: 19820924

Date revised: 20061115.

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A computer in every surgery?

Accession number & update

07427260 Medline R 19810101.

Source

British medical journal, {Br-Med-J}, 26 Jul 1980, vol. 281, no. 6235, p. 309-10, ISSN: 0007-1447.

Author(s)

Sheldon-M-G, Malcolm-A.

Descriptors

COMPUTERS/*EC (economics);

FAMILY-PRACTICE/*IS (instrumentation);

PRACTICE-MANAGEMENT-MEDICAL/*EC (economics).

Language

English.

Publication type

Letter.

Journal subset

AIM; IM.

Country of publisher

ENGLAND.

Journal code

0000372673.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1980.

Publication date

19800726.

Entry date

Date created: 19810126

Date completed: 19810126

Date revised: 20030513.

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Self-audit of prescribing habits and clinical care in general practice.

Accession number & update

00536978 Medline R 19800101.

Source

The Journal of the Royal College of General Practitioners, {J-R-Coll- Gen-Pract}, Dec 1979, vol. 29, no. 209, p. 703-6, 710-1, ISSN: 0035-8797.

Author(s)

Sheldon-M-G.

Descriptors

FAMILY-PRACTICE/*;

MEDICAL-AUDIT/*;

PRESCRIPTIONS-DRUG/*.

ADOLESCENT;

CHILD;

CHILD-PRESCHOOL;

COMMON-COLD/DT (drug therapy);

COUGH/DT (drug therapy);

DERMATOMYCOSES/DT (drug therapy);

HUMANS;

INFANT;

THERAPEUTICS.

Language

English.

Publication type

Journal-Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007503107.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1979.

Publication date

19791200.

Entry date

Date created: 19800514

Date completed: 19800514

Date revised: 20041117.

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Recording of blood pressure readings.

Accession number & update

00435830 Medline R 19790101.

Source

British medical journal, {Br-Med-J}, 24 Mar 1979, vol. 1, no. 6166, p. 824, ISSN: 0007-1447.

Author(s)

Sheldon-M-G.

Descriptors

BLOOD-PRESSURE-DETERMINATION/*MT (methods).
DIASTOLE;
HUMANS.

Language

English.

Publication type

Letter.

Journal subset

AIM; IM.

Country of publisher

ENGLAND.

Journal code

0000372673.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1979.

Publication date

19790324.

Entry date

Date created: 19790716

Date completed: 19790716

Date revised: 20041117.

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A trial of Fortagesic and Paramol 118 in osteoarthritis.

Accession number & update

01027635 Medline R 19770101.

Source

The Journal of international medical research, {J-Int-Med-Res}, 1976, vol. 4, no. 6, p. 432-4, ISSN: 0300-0605.

Author(s)

Andrews-C-J, Cohen-L, Crail-R-B, Douch-G, **Sheldon-M-G**, Wray-K-A.

Abstract

Fortagesic was compared with Paramol 118 in a fourteen day single-blind crossover study in patients with moderate pain due to osteoarthritis. Both preparations were shown to be similarly effective. More side-effects were seen with Paramol 118 than with Fortagesic and more patients preferred Fortagesic. These differences were not statistically significant, but it is concluded that Fortagesic is a useful effective analgesic for standard use in moderate pain.

Descriptors

ACETAMINOPHEN/AE (adverse effects), *TU (therapeutic use);
CODEINE/AE (adverse effects), *AA (analogs & derivatives), *TU
(therapeutic use);
OSTEOARTHRITIS/*DT (drug therapy);
PENTAZOCINE/AE (adverse effects), *TU (therapeutic use).
DRUG-COMBINATIONS;
HUMANS.

CAS Registry numbers

0 (Drug-Combinations);
103-90-2 (Acetaminophen);
359-83-1 (Pentazocine);
76-57-3 (Codeine).

Language

English.

Publication type

Clinical-Trial, Comparative-Study, Journal-Article, Randomized-
Controlled-Trial.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0000346411.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1976.

Publication date

19760000.

Entry date

Date created: 19770812

Date completed: 19770812

Date revised: 20061115.

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The problems of problem-orientated records.

Accession number & update

01085365 Medline R 19760101.

Source

The Journal of the Royal College of General Practitioners, {J-R-Coll- Gen-Pract}, Jun 1976, vol. 26, no. 167, p. 437-46, ISSN: 0035-8797.

Author(s)

Sheldon-M-G.

Descriptors

MEDICAL-RECORDS/*;
MEDICAL-RECORDS-PROBLEM-ORIENTED/*.
FAMILY-PRACTICE;
GREAT-BRITAIN.

Language

English.

Publication type

Journal–Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007503107.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1976.

Publication date

19760600.

Entry date

Date created: 19761029

Date completed: 19761029

Date revised: 20001218.

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An A4 size registration sheet for general practice.

Accession number & update

04465453 Medline R 19750101.

Source

The Journal of the Royal College of General Practitioners, {J–R–Coll– Gen–Pract}, Aug 1974, vol. 24, no. 145, p. 582–3, ISSN: 0035–8797.

Author(s)

Sheldon–M–G.

Descriptors

FAMILY–PRACTICE/*;

MEDICAL–RECORDS/*.

Language

English.

Publication type

Journal–Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0007503107.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1974.

Publication date

19740800.

Entry date

Date created: 19751204

Date completed: 19751204

Date revised: 20001218.

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The clinical significance of systolic murmurs in the elderly.**Dialog eLinks**

Full text available at

**Accession number & update**

01146671 Medline R 19750101.

Source

Age and ageing, {Age-Ageing}, May 1975, vol. 4, no. 2, p. 99-104, ISSN: 0002-0729.

Author(s)

Griffiths-R-A, Sheldon-M-G.

Abstract

A group of 278 patients, over the age of 60 years, and representative of geriatric and general medical admissions to the District General Hospital in Banbury, Oxfordshire, was studied to correlate the prevalence of systolic murmurs to age, sex, cardiac failure, ischaemic heart disease, dysrhythmias, hypertension, peripheral vascular disease and anaemia. The object was to establish the clinical significance of these murmurs and test a postulate that they could not be dismissed as benign. Seventy-five per cent of the murmurs were judged to be aortic and 12 per cent mitral in origin. The prevalence of systolic murmurs increased with age from 32 per cent at 60-64 years to 57 per cent over 85 years, and was greater in females (44 per cent) than in males (34 per cent). The presence of systolic murmurs was related to the presence of cardiac failure, ischaemic heart disease, dysrhythmias, hypertension, peripheral vascular disease and anemia. Only 8 per cent of patients with systolic murmurs had none of the above-mentioned six cardiovascular abnormalities compared with 36 per cent of patients without such a murmur, while multiple cardiovascular abnormalities were also commoner in the former group. The mortality rate in hospital was similar for patients with or without a systolic murmur.

Descriptors

CARDIOVASCULAR-DISEASES/*DI (diagnosis), EP (epidemiology);
 HEART-AUSCULTATION/*;
 HEART-MURMURS/*.
 AGE-FACTORS;
 AGED;
 ANEMIA/DI (diagnosis);
 AORTIC-VALVE-STENOSIS/DI (diagnosis);
 ARRHYTHMIAS-CARDIAC/DI (diagnosis);
 DIAGNOSIS-DIFFERENTIAL;
 ENGLAND;
 FEMALE;
 HEART-FAILURE/DI (diagnosis);
 HUMANS;
 HYPERTENSION-MALIGNANT/DI (diagnosis);
 MALE;
 MIDDLE-AGED;
 MITRAL-VALVE-INSUFFICIENCY/DI (diagnosis);
 TRICUSPID-VALVE-INSUFFICIENCY/DI (diagnosis);
 VASCULAR-DISEASES/DI (diagnosis).

Language

English.

Publication type

Journal-Article.

Journal subset

IM.

Country of publisher

ENGLAND.

Journal code

0000375655.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1975.

Publication date

19750500.

Entry date

Date created: 19750929

Date completed: 19750929

Date revised: 20071115.

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The effect of prenylamine on the failing canine isolated heart preparation.

Accession number & update

04276413 Medline R 19740101.

Source

The Journal of cardiovascular surgery, {J-Cardiovasc-Surg-Torino}, Jul-Aug 1974, vol. 15, no. 4, p. 438-46, ISSN: 0021-9509.

Author(s)

Sheldon-M-G, Braimbridge-M-V, Clement-A-J, Yalav-E, Darracott-S.

Descriptors

HEART/*DE (drug effects);
PRENYLAMINE/AD (administration & dosage), *PD (pharmacology).
ADENOSINE-TRIPHOSPHATASES/ME (metabolism);
ANIMALS;
BIOPSY;
CORONARY-CIRCULATION/DE (drug effects);
DISEASE-MODELS-ANIMAL;
DOGS;
HEART-FAILURE/DT (drug therapy), PA (pathology);
HEART-VENTRICLES;
HISTOCYTOCHEMISTRY;
INDICATORS-AND-REAGENTS;
MYOCARDIUM/EN (enzymology), PA (pathology);
SUCCINATE-DEHYDROGENASE/ME (metabolism).

CAS Registry numbers

0 (Indicators-and-Reagents);
390-64-7 (Prenylamine);
EC 1.3.99.1 (Succinate-Dehydrogenase);
EC 3.6.1.- (Adenosine-Triphosphatases).

Language

English.

Publication type

In-Vitro, Journal-Article.

Journal subset

IM.

Country of publisher

ITALY.

Journal code

0000066127.

Information provider

NLM.

Notes

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1974.

Publication date

19740700.

Entry date

Date created: 19740919

Date completed: 19740919

Date revised: 20071115.

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Effect of glucose and insulin on the failing myocardium in an isolated heart preparation.

Accession number & update

05401836 Medline R 19710101.

Source

British heart journal, {Br-Heart-J}, May 1969, vol. 31, no. 3, p. 393, ISSN: 0007-0769.

Author(s)

Sheldon-M-G, Braimbridge-M-V, Clement-A-J.

Descriptors

GLUCOSE/*PD (pharmacology);
HEART/*DE (drug effects);
INSULIN/*PD (pharmacology).
ANIMALS;
BLOOD-GLUCOSE/AN (analysis);
BLOOD-PRESSURE;
CORONARY-VESSELS;
DOGS;
ELECTROCARDIOGRAPHY;
HEMOGLOBINOMETRY;
TEMPERATURE.

CAS Registry numbers

0 (Blood-Glucose);
11061-68-0 (Insulin);
50-99-7 (Glucose).

Language

English.

Publication type

In-Vitro, Journal-Article.

Journal subset

AIM; IM.

Country of publisher

ENGLAND.

Journal code

0000370634.

Information provider

NLM.

Notes

DataStar Documents

Publication model: Print; Cited medium: Print; ISSN: Print.

Publication year

1969.

Publication date

19690500.

Entry date

Date created: 19710429

Date completed: 19710429

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