Heart clinic is rapid route to specialist services

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Any form of chest pain can be worrying as when it comes to the heart patients often fear the worst – increasing anxiety and often exacerbating the problem.

At Cambridge University Hospitals a one-stop-shop outpatient clinic focuses on two key things; clinical assessment of their current symptoms and modifying their future risk for Cardiovascular Disease.

This early intervention by the Multidisciplinary (MDT) Rapid Access Chest Pain clinic (RACPC) is aiming to help to cut down on emergency admissions to hospital and provides patients with a fast route to specialist cardiac services.

All patients are offered an appointment within two weeks of referral by their GP and a diagnosis is made by a consultant cardiologist & cardiac specialist nurse. The patient is then put on the right pathway, be it further investigations, medication or all-important advice and education on reducing risk factors.

Patients can expect to have a two part consultation within the RACPC including a clinical assessment by a Cardiology consultant and the specialists nursing team whom also take the time using an iPad to educate people using visual aids to identify individual’s future risk and ways of lifestyle modifications to improve these. Patients may also be offered an ETT (Exercise Tolerance Test) on the day if needed.
support any emergency admissions in Accident & Emergency, where patients with more severe heart problems, such as suspected myocardial infarction (MI) or acute coronary syndromes, should attend.

Jo Moir, lead cardiac specialist nurse, said: “We have been involved in the Tuesday morning running of the clinic for some time but the difference we brought in over the last year was the multidisciplinary team approach for our chest pain patients.

“This new MDT approach is rather a unique model for the historical RACPC, which has been around for many years and traditionally throughout Britain as either Consultant or nurses led.

“We focus on two things - addressing their current symptoms and modifying their future risk.

“This is bringing huge benefits to patients as they are seen within two weeks and they can get a quick diagnosis to be put on the right pathway in one appointment.

“This early intervention, we believe, is having a huge impact on improving patient experience and outcomes.”