



# Fundoscopy use in patients presenting with headache in ambulatory care

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## AIM

NICE and BASH guidelines advocate the use of fundoscopy in all patients presenting with headache.

The Ambulatory Care Centre (ACC) at the Royal Derby Hospital boasts a headache pathway, rendering headache a common presentation.

The **aim** of this project was to **identify the percentage of patients that undergo fundoscopy when presenting with headache to ACC.**

### Headache checklist

1. Red flags ruled out in history
2. **Fundoscopy**
3. Blood pressure + temperature
4. Cranial and peripheral nervous system examination
5. Gait examined
6. Temporal artery pulsation
7. Meningitis : Kernig + Brudzinski and neck rigidity

Please document fundoscopy attempt, even if not successful !

#### References

1. British Association for the Study of Headache (BASH), *National Headache Management System for Adults 2019*. Available from <http://www.bash.org.uk/guidelines/>. 2019. Chapter 1, Page 13.

2. National Institute for health and Care Excellence (NICE), *Headache - assessment*. Available from <https://cks.nice.org.uk/topics/headache-assessment/>. 2019. Chapter: Diagnosis, Page 2.

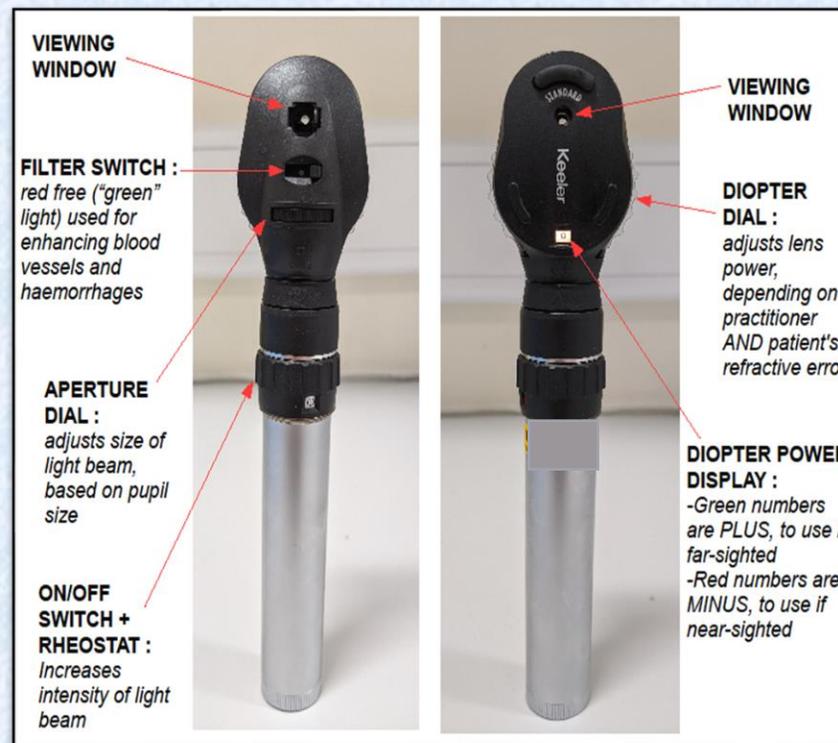
## METHODS

This was a retrospective study, using electronic notes to collect data.

Headache as presentation was used for inclusion criteria.

Excluded were patients who had fundoscopy done the same day by eye clinic and patients too photophobic to tolerate the fundoscopy.

39 patients were included during July 2020 (first cycle), 42 during the re-audit in September 2020 (second cycle) and 59 were identified in October 2020 (third cycle).

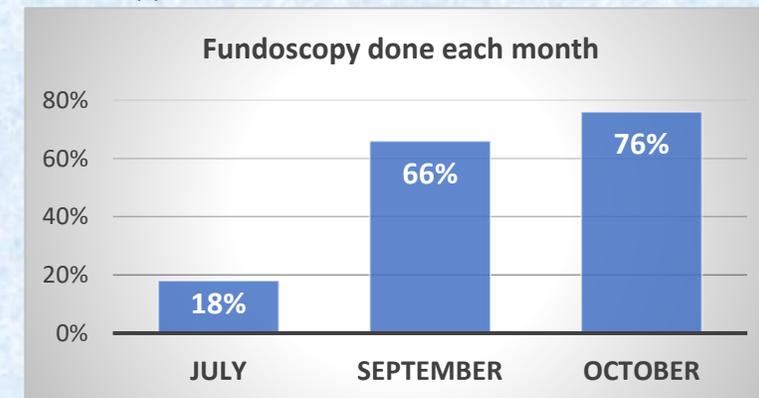


## RESULTS

During the **first cycle** (July), only 7 patients out of 39 had fundoscopy done, a total of **18%**.

**Changes** were implemented in August with **regular teachings on fundoscopy, a headache checklist displayed in doctors' office, as well as a fundoscope manual guide and examples of abnormal findings.**

During the **third cycle** (October), 45 patients out of 59 had fundoscopy done, a total of **76%**.



## CONCLUSION

The first cycle revealed that the standard of current practice was subpar with only 18% of patients presenting with headache getting fundoscopy.

Unfamiliarity with guidelines and lack of confidence surrounding fundoscopy skillset were believed to be the primary cause.

**Changes implemented brought an increase of 322%.**

These results are very encouraging, and we should build on them to bring our practice closer to the standards.