



Letter to the Editor

Medical referrals in private practice: Need to keep the fine fabric intact

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Primary care
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Sir,

In India, the private health-care system follows the three-tier system, when it comes to referral and care of the patients. The family physician, irrespective of system of medicine practised, refers the patient to secondary care physician, when he finds that the medical problems of his patient are beyond his technical competence. Similarly, when the secondary care physician finds that his/her patient is in need of better level of care, he promptly refers to the patient to tertiary care physician or so-called superspecialist working at an institution having higher level of technical competency and all other resources to provide desired state-of-the-art medical care.

Thus, there should be a good coordination and close relationship between all these three levels of health-care system to be effective. The three level referral system is also an important tool to facilitate the flow of patients among the healthcare providers. A well-executed and planned referral system definitely enhances the standard of medical care, and it also makes it more cost-effective. Referring the patient back to the previous level of health-care provider for follow-up treatment and care for the smooth recovery of the patient from an ailment is as important as the forward referral. Any deficiency or deviation in this practice could adversely affect the final outcome of the health care; irrespective of the quality of the tertiary or secondary care provided.^{1,2}

With the rise of number of tertiary care physicians or the super-specialists, we are witnessing a new trend or tendency unfolding in India, threatening the fine fabric of the existing three-tier referral system. It has become quite common for a primary care personnel directly referring a needy patient to tertiary care physicians, bypassing the secondary care physicians. The tertiary care physician then promptly refers the patient back to the primary care physician following the suitable medical care/procedures as mark of gratitude for the referral. Now, the primary care physician who has received the patient for follow-up is utterly deficient in

technical competence and has a tough time in understanding the complex nature of the problems of the patient at hand. He struggles to make any alteration in the treatment plan of the patient with the changing clinical scenario. This leads to a total ineffectiveness of the medical care provided and also compromises with safety of the high-standard medical care received at the tertiary care centre. By chance, the primary care health personnel is from an alternative system of medicine, god save the patient. The secondary care physician is the obvious missing link here and his/presence would make all the difference in the well-being of the patient.

This new trend is highly disturbing and a dangerous precedent. This deviation is obviously due to the after-math of the unhealthy competition amongst the tertiary care health providers. So, it is imperative not to exclude secondary care physician in the three-tier system of private medical health care. Whatever could be the justification, this new practice seems to be shortsighted one, and it is time to weed out the perils of this evil practice, in the best interest of the patients, healthcare profession.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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References

1. Tabish SA. *Referral System in Health Care*; 2010. https://www.researchgate.net/publication/261957501_Referral_System_in_Health_Care.
2. Ghoshal R. What ails India's two-tiered healthcare system? A philosophical enquiry. *Indian J Med Ethics*. 2015 Jan-Mar;12(1):25–29.

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