House Visit By The Cardiologist

A modality of practise that I was exposed to after returning to Pakistan was the house calls I was expected to make. I did comply with my patient's calls to make such "urgently needed" house visits for a while. It was some time ago that I decided to take stock of what these house visits had achieved. It became immediately clear that most of the patients were neither serious nor bed ridden and they were all well to do. That most of them could have very easily and more profitably visited the physician's office or an emergency room. It was plain that most patient's were using the physician and by virtue of being able to pay a higher consulation fee were saving themselves the discomfort of having to go to a physician's office and wait for their turn. In short, these house visits were no more than an ordinary consultation, with the patient using the physician because of his ability to pay more or use the pressure of high governmental post.

In terms of physician time utilization it was a terrible waste. This time could be much better utilized for other patients or by the physician himself.

In terms of service provided, no more than an ECG or a change in prescription was done. At the most, advice for hospitalization was given and the patient any way had to be transported to the emergency room for admission. Only on a rare occasion an analgesic had to be administered before shifting the patient to a hospital. Of course, a visiting physician is not equipped to do much if a bad cardiac emergency were to occur and the patient would again have to be shifted to a hospital.

While it may be all right for a family physician to make house calls, there seems in my mind no justification for a specialist to make house calls. If a patient is sick enough to require a house visit, he is sick enough to be hospitalized or treated in a proper emergency room. It is time that this abuse of specialist's time and waste of patient's money is stopped.

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