



No. 17 – Night Calls

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Title: **Night Calls**

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IT'S THE MIDDLE OF THE NIGHT - WHEN SHOULD YOU CALL THE DOCTOR?

If someone with ITP has a nosebleed or other bleed which will not stop they should go to the A&E (Emergency) department of their local hospital, or if they have no transport telephone for an ambulance. The same applies if an ITP sufferer seems delirious or incoherent of speech – especially if, in addition, he or she is vomiting.

If an ITP sufferer or parent of an ITP child is worried, do not delay calling for advice, stating clearly about the ITP. In 99% of cases it will nothing to panic about, but will set your mind at rest.

So with normal circumstances – before you 'phone for a doctor – ask yourself:

- Does the condition really require *urgent* attention?
- Could you/your child get back to sleep and then wait to see how things are in the morning?

(With children many minor ailments come and go very swiftly (literally overnight sometimes), which can be treated with simple home remedies – like Calpol – but if you really are worried about the child's condition and need advice, do call for assistance.)

Remember that although it may have been quiet and peaceful at home during the night the emergency services may have been extremely busy, sometimes seriously overstretched, especially over Saturday night/Sunday morning. So do treat the service with consideration. Your usual GP's surgery is where you should make the first contact. From there you may be given another emergency number to ring, (sometimes from an answerphone message) so have a pen and paper to hand in order to make a note of it.

- You will speak either to a receptionist or to the doctor directly. Whoever this is to do try to be clear and concise about the problem.
- Sometimes a receptionist will say that the doctor will 'phone back (remember, the doctor may be out on an emergency already), so don't be alarmed.
- The doctor will advise you on what to do. He/she may suggest that you use a home remedy or to wait until morning and visit your surgery normally.

(In spite of how frightening things can seem to parents in the middle of the night many children don't need to be seen urgently, so you may be advised to wait until the morning to see how the child settles down – which many do. So don't be alarmed if this is suggested.)

If you do need to be seen urgently you may be given an address to be seen, which may not be your normal surgery, but one used by the emergency doctor. For someone too ill to travel the doctor may make a home visit or in rare circumstances may call an ambulance to transport you/your child to hospital.

It is important to remember that unless you have very good reason it is a misuse of the service to insist on a home visit. Sure, it is there to help you with urgent medical problems, but using it for non-emergencies increases the chance that life-threatening conditions will be pushed down the queue and may not receive the attention they need early enough. No one wants that to happen!

ADDITIONAL ADVICE ABOUT ITP:

- Do inform whichever health professional you see – nurse, doctor or consultant – that you or your child has ITP and may have a bleeding related condition.
- If you are not sure which symptoms require attention first, don't be afraid to say so.
- Try to establish where you can contact your doctor or consultant for any further urgent advice or assistance between appointments, should it become necessary at any time.

Lastly, always remember to inform the doctor of all medications and vaccines that have been administered recently.