



## Interview with Dr Amil Mair, Doctor

### Case study: BMJ Best Practice

Dr Amil Mair is an NHS Doctor in North East England. BMJ recently caught up with him to hear about his experience using BMJ Best Practice.



#### Optimising patient care

“I often access BMJ Best Practice on the computer to check that all aspects of a patient’s care has been taken into account and that they are on the best treatment pathway. When I can have a quick read about what’s going on, it makes the management safer and enables me to be more efficient.

“I particularly use the BMJ Best Practice comorbidities tool. Recently I had a patient who was admitted with pancreatitis, but also had diabetes, asthma and mental health issues. Using BMJ Best Practice comorbidities I searched pancreatitis to check everything was covered and that we had got all the correct blood tests to be able to rate the severity of it. Then I looked at all the other conditions the patient had and checked the drug interactions with the asthmatic medications she was on.

“The patient’s pancreatitis was caused by drinking too much alcohol, so one of the factors was to explore what was driving that. The tool really helped with this, and prompted conversations with the patient about their alcohol intake. By using the comorbidities tool, we were able to optimise the patient’s care and manage their multiple conditions, and, importantly, help prevent anything going wrong.”

## Adopting a holistic approach

“BMJ Best Practice enables me to provide more holistic care to patients by guiding me to consider the whole patient. Issues like mental health problems are often overlooked, but the tool prompts you to consider all aspects of their care.

“The other day one of my seniors said ‘every day is a learning day’ and that’s so true. When you’re seeing patients with different conditions you’re not going to be able to remember everything, but BMJ Best Practice acts as a useful reminder and helps to build up your own knowledge.

“Before I speak to a patient or family member I often use the app to get some background information or to look up the latest guidelines. It reduces the risk of talking to a patient who has conducted their own research and who wants to know about the various treatment options and you not being able to fully answer them.”

## Sharing impact with colleagues

“We all have our own ways of doing things, but I encourage colleagues to use BMJ Best Practice, simply by telling them how easy it is to access, and that’s it’s free. It’s relevant for everyone in the multidisciplinary team, not just to doctors, but nurses, pharmacists, physiotherapists as well. Sometimes the nurses might be a bit unsure about what is going on with a patient, so I encourage them to log onto BMJ Best Practice. It really helps with communication too because they can use information in the tool to explain to the patient what is happening, and it can also give them confidence in talking to the rest of the multidisciplinary team.”

## Building confidence

“As a junior doctor BMJ Best Practice doesn’t just provide insight and knowledge, but also helps to build your confidence. If I’ve seen something on the app, I have more confidence to say ‘actually I think this patient needs to be seen’ or ‘I think they need to be on this medication or we need to do this investigation’.

“On occasion I’ve been asked by colleagues to prescribe medication I’ve felt might not be appropriate. When this happens, to be able to turn to BMJ Best Practice is really helpful. Junior doctors are frequently asked to prescribe medication, so to be able to reflect on it and access the latest evidence-based information helps me to discuss the treatment plans more meaningfully with colleagues so that we can do what is best for the patient.”

If you would like to know more about BMJ Best Practice or would like to share your feedback with BMJ, please email [nhsengland@bmj.com](mailto:nhsengland@bmj.com)