

# NHS Pharmacy First – referrals for minor illnesses

**Service suitability**

The service is only for patients aged over 1 year.

CONDITIONS	What conditions are SUITABLE for referral to pharmacists?			Do NOT refer in these circumstances	
BITES/STINGS	<ul style="list-style-type: none"> <li>Bee sting</li> <li>Wasp sting</li> </ul>	<ul style="list-style-type: none"> <li>Stings with minor redness</li> </ul>	<ul style="list-style-type: none"> <li>Stings with minor swelling</li> </ul>	<ul style="list-style-type: none"> <li>Drowsy / fever</li> <li>Fast heart rate</li> </ul>	<ul style="list-style-type: none"> <li>Severe swellings or cramps</li> </ul>
COLDS	<ul style="list-style-type: none"> <li>Cold sores</li> <li>Coughs</li> </ul>	<ul style="list-style-type: none"> <li>Flu-like symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Sore throat</li> </ul>	<ul style="list-style-type: none"> <li>Lasted +3 weeks</li> <li>Shortness of breath</li> </ul>	<ul style="list-style-type: none"> <li>Chest pain</li> <li>Unable to swallow</li> </ul>
CONGESTION	<ul style="list-style-type: none"> <li>Blocked or runny nose</li> </ul>	<ul style="list-style-type: none"> <li>Constant need to clear their throat</li> </ul>	<ul style="list-style-type: none"> <li>Excess mucus</li> <li>Hay fever</li> </ul>	<ul style="list-style-type: none"> <li>Lasted +3 weeks</li> <li>Shortness of breath</li> </ul>	<ul style="list-style-type: none"> <li>1 side obstruction</li> <li>Facial swelling</li> </ul>
EAR	<ul style="list-style-type: none"> <li>Earache</li> </ul>	<ul style="list-style-type: none"> <li>Ear wax</li> <li>Blocked ear</li> </ul>	<ul style="list-style-type: none"> <li>Hearing problems</li> </ul>	<ul style="list-style-type: none"> <li>Something may be in the ear canal</li> <li>Discharge</li> </ul>	<ul style="list-style-type: none"> <li>Severe pain.</li> <li>Deafness</li> <li>Vertigo</li> </ul>
EYE	<ul style="list-style-type: none"> <li>Conjunctivitis</li> <li>Dry/sore tired eyes</li> <li>Eye, red or Irritable</li> </ul>	<ul style="list-style-type: none"> <li>Eye, sticky</li> <li>Eyelid problems</li> </ul>	<ul style="list-style-type: none"> <li>Watery / runny eyes</li> </ul>	<ul style="list-style-type: none"> <li>Severe pain</li> <li>Pain 1 side only</li> </ul>	<ul style="list-style-type: none"> <li>Light sensitivity</li> <li>Reduced vision</li> </ul>
GASTRIC / BOWEL	<ul style="list-style-type: none"> <li>Constipation</li> <li>Diarrhoea</li> <li>Infant colic</li> </ul>	<ul style="list-style-type: none"> <li>Heartburn</li> <li>Indigestion</li> </ul>	<ul style="list-style-type: none"> <li>Haemorrhoids</li> <li>Rectal pain,</li> <li>Vomiting or nausea</li> </ul>	<ul style="list-style-type: none"> <li>Severe / on-going</li> <li>Lasted +6 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Patient +55 years</li> <li>Blood / Weight loss</li> </ul>
GENERAL	<ul style="list-style-type: none"> <li>Hay fever</li> </ul>	<ul style="list-style-type: none"> <li>Sleep difficulties</li> </ul>	<ul style="list-style-type: none"> <li>Tiredness</li> </ul>	<ul style="list-style-type: none"> <li>Severe / on-going</li> </ul>	
GYNAE / THRUSH	<ul style="list-style-type: none"> <li>Cystitis</li> <li>Vaginal discharge</li> </ul>	<ul style="list-style-type: none"> <li>Vaginal itch or soreness</li> </ul>		<ul style="list-style-type: none"> <li>Diabetic / Pregnant</li> <li>Under 16 / over 60</li> <li>Unexplained bleeding</li> </ul>	<ul style="list-style-type: none"> <li>Pharmacy treatment not worked</li> <li>Had thrush 2x in last 6 months</li> </ul>
PAIN	<ul style="list-style-type: none"> <li>Acute pain</li> <li>Ankle or foot pain</li> <li>Headache</li> <li>Hip pain or swelling</li> <li>Knee or leg pain</li> </ul>	<ul style="list-style-type: none"> <li>Lower back pain</li> <li>Lower limb pain</li> <li>Migraine</li> <li>Shoulder pain</li> </ul>	<ul style="list-style-type: none"> <li>Sprains and strains</li> <li>Thigh or buttock pain</li> <li>Wrist, hand or finger pain</li> </ul>	<ul style="list-style-type: none"> <li>Condition described as severe or urgent</li> <li>Conditions have been on-going for +3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Chest pain / pain radiating into the shoulder</li> <li>Pharmacy treatment not worked</li> <li>Sudden onset</li> </ul>
SKIN	<ul style="list-style-type: none"> <li>Acne, spots and pimples</li> <li>Athlete's foot</li> <li>Blisters on foot</li> <li>Dermatitis / dry skin</li> <li>Hair loss</li> </ul>	<ul style="list-style-type: none"> <li>Hay fever</li> <li>Nappy rash</li> <li>Oral thrush</li> <li>Rash - allergy</li> <li>Ringworm / threadworm</li> </ul>	<ul style="list-style-type: none"> <li>Scabies</li> <li>Skin dressings</li> <li>Skin rash</li> <li>Warts/verrucae</li> <li>Wound problems</li> </ul>	<ul style="list-style-type: none"> <li>Condition described as severe or urgent</li> <li>Conditions have been on-going for +3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Pharmacy treatment not worked</li> <li>Skin lesions / blisters with discharge</li> <li>Diabetes related?</li> </ul>
MOUTH/THROAT	<ul style="list-style-type: none"> <li>Cold sore blisters</li> <li>Flu-like symptoms</li> <li>Hoarseness</li> </ul>	<ul style="list-style-type: none"> <li>Mouth ulcers</li> <li>Sore mouth</li> <li>Sore throat</li> </ul>	<ul style="list-style-type: none"> <li>Oral thrush</li> <li>Teething</li> <li>Toothache</li> </ul>	<ul style="list-style-type: none"> <li>Lasted +10 days</li> <li>Swollen painful gums</li> <li>Sores inside mouth</li> </ul>	<ul style="list-style-type: none"> <li>Unable to swallow</li> <li>Patient has poor immune system</li> <li>Voice change</li> </ul>
SWELLING	<ul style="list-style-type: none"> <li>Ankle or foot swelling</li> <li>Lower limb swelling</li> </ul>	<ul style="list-style-type: none"> <li>Thigh or buttock swelling</li> <li>Toe pain or swelling</li> </ul>	<ul style="list-style-type: none"> <li>Wrist, hand or finger swelling</li> </ul>	<ul style="list-style-type: none"> <li>Condition described as severe or urgent</li> <li>Condition ongoing for +3 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Discolouration to skin</li> <li>Pharmacy treatment not worked</li> <li>Recent travel abroad</li> </ul>

# NHS Pharmacy First – 7 clinical pathways

Urinary tract infection	Shingles*	Impetigo	Infected insect bites	Acute sore throat	Acute sinusitis	Acute otitis media
A UTI is an infection in any part of the urinary system.	Shingles is an infection that causes a painful rash	Impetigo is a common infection of the skin. It is contagious, which means it can be passed on by touching.	Insect bites and stings can become infected or cause a reaction.	Sore throat is a symptom resulting from inflammation of the upper respiratory tract	Sinusitis is swelling of the sinuses, usually caused by an infection. The sinuses are small, empty spaces behind your cheekbones and forehead that connect to the inside of the nose.	An infection of the middle ear.
<b>Inclusion:</b> <ul style="list-style-type: none"> <li>Female</li> <li>Aged between 16 - 64</li> <li>Suspected lower UTI</li> </ul>	<b>Inclusion:</b> <ul style="list-style-type: none"> <li>18 years and over</li> <li>Suspected case of shingles.</li> <li>Rash appeared within the last 72 hours - 7 days</li> </ul>	<b>Inclusion:</b> <ul style="list-style-type: none"> <li>1 year and over</li> <li>Signs and symptoms of impetigo</li> <li>Localised (4 or fewer lesions/clusters present)</li> </ul>	<b>Inclusion:</b> <ul style="list-style-type: none"> <li>1 year and over</li> <li>Infection that is present or worsening at least 48 hours after the initial bite(s) or sting(s)</li> </ul>	<b>Inclusion:</b> <ul style="list-style-type: none"> <li>5 years and over</li> <li>Suspected sore throat</li> </ul>	<b>Inclusion:</b> <ul style="list-style-type: none"> <li>12 years and over</li> <li>Suspected signs and symptoms of sinusitis</li> <li>Symptom duration of 10 days or more</li> </ul>	<b>Inclusion:</b> <ul style="list-style-type: none"> <li>Aged between 1 – 17</li> <li>Suspected signs and symptoms of acute otitis media</li> </ul>
<b>Exclusion:</b> <ul style="list-style-type: none"> <li>Male</li> <li>&lt;16 or &gt;64</li> <li>Pregnant</li> <li>Breastfeeding</li> <li>Recurrent UTI (2 in last 6 months or 3 in last 12 months)</li> <li>Catheter</li> </ul>	<b>Exclusion:</b> <ul style="list-style-type: none"> <li>&lt; under age of 18</li> <li>Pregnant or suspected pregnancy</li> <li>Breastfeeding with shingle sores on the breasts</li> <li>Shingles rash onset over 7 days ago</li> </ul>	<b>Exclusion:</b> <ul style="list-style-type: none"> <li>&lt; under 1 year of age</li> <li>Pregnancy or suspected pregnancy in individuals under 16 years of age</li> <li>Breastfeeding with impetigo lesion(s) present on the breast</li> <li>Recurrent impetigo (2 or more episodes in the same year)</li> <li>Widespread lesions/clusters present</li> <li>Systemically unwell</li> </ul>	<b>Exclusion:</b> <ul style="list-style-type: none"> <li>&lt; under 1 year of age</li> <li>Pregnancy or suspected pregnancy in individuals under 16 years of age</li> <li>Systemically unwell</li> <li>Bite or sting occurred while travelling outside the UK</li> </ul>	<b>Exclusion:</b> <ul style="list-style-type: none"> <li>Individuals under 5 years of age</li> <li>Pregnancy or suspected pregnancy in individuals under 16 years of age</li> <li>age</li> <li>Recurrent sore throat/tonsillitis (7 or more significant episodes in the preceding 12 months or 5+ in each of the preceding 2 years, or 3+ in the preceding three years)</li> <li>Previous tonsillectomy</li> </ul>	<b>Exclusion:</b> <ul style="list-style-type: none"> <li>Individuals under 12 years of age</li> <li>Pregnancy or suspected pregnancy in individuals under 16 years of age</li> <li>Symptom duration of less than 10 days</li> <li>Recurrent sinusitis ((4 or more annual episodes of sinusitis)</li> </ul>	<b>Exclusion:</b> <ul style="list-style-type: none"> <li>Individuals under 1 year of age or over 18 years of age</li> <li>Pregnancy or suspected pregnancy in individuals under 16 years of age</li> <li>Recurrent infection (3+ episodes in preceding 6 months, or 4+ episodes in the preceding 12 months with at least one episode in the past 6 months.)</li> </ul>