

Comment on “Analysis of incorrect referrals to the cardiovascular surgery outpatient clinic”

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Received: September 18, 2024 Accepted: September 23, 2024 Published online: October 17, 2024

I read with interest the article titled, “Analysis of incorrect referrals to the cardiovascular surgery outpatient clinic,” recently published in Cardiovascular Surgery and Interventions by Rahman and Ayyıldız.^[1] The study is an important and timely research in terms of highlighting the inefficiencies of the Central Physician Appointment System (CPAS) in Türkiye and the burden it places on healthcare services.

The data presented in the study clearly show the difficulties in the functioning of the CPAS and the areas where the system can be improved. In this sense, the suggestions are crucial to improving the performance of the system. However, I believe there are some points that should be addressed.

It is an undeniable fact that the number of physicians in our country is insufficient in relation to the population. According to the 2021 OECD (Organisation for Economic Co-operation and Development) data, the number of physicians per 1,000 individuals in our country was 2.2, while the mean was 3.7.^[2] On the other hand, considering the number of examinations by specialty, the number of examinations in cardiology was several times higher than in cardiovascular surgery.^[3] However, the same ratio was not observed between the number of cardiology specialists and cardiovascular surgery specialists.

Considering that the number of daily appointments provided by the CPAS is the same for all specialists, appointments for the cardiology department are available much later than for the cardiovascular surgery department. Therefore, it should not be overlooked that patients may prefer or be directed to the cardiovascular surgery department

to reach the specialist related to the possible cardiac complaints earlier. I believe that if the optimal number of specialists is provided according to the population, the reasons for referrals to the wrong department will be better understood.

In conclusion, the study by Rahman and Ayyıldız provides a valuable starting point by addressing an important problem in the Turkish healthcare system. I look forward to further research in this area and hope that the authors will consider these recommendations in their future work.

Data Sharing Statement: The data that support the findings of this study are available from the corresponding author upon reasonable request.

Conflict of Interest: The author declared no conflicts of interest with respect to the authorship and/or publication of this article.

Funding: The author received no financial support for the research and/or authorship of this article.

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Citation:

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