International Classification of Primary Care as a Reference for Coding the Demand for Care in Primary Health Care

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Abstract: Introduction: The International Classification of Primary Care (ICPC) is part of the morbidity classification system. It had 17 chapters, and each is coded by an alphanumeric code: the letter corresponds to the chapter, the number to a paragraph in the chapter. The objective of this study is to show the utility of this classification in the coding of the reasons for demand for care in Primary health care (PHC), its advantages and limits. Methods: This is a cross-sectional descriptive study conducted in 4 PHC in Ariana district. Data on the demand for care during 2 days in the same week were collected. The coding of the information was done according to the CISP. The data was entered and analyzed by the EPI Info 7 software. Results: A total of 523 demands for care were investigated. The patients who came for the consultation are predominantly female (62.72%). Most of the consultants are young with an average age of 35 ± 26 years. In the ICPC, there are 7 rubrics: 'infections' is the most common reason with 49.9%, 'other diagnoses' with 40.2%, 'symptoms and complaints' with 5.5%, 'trauma' with 2.1%, 'procedures' with 2.1% and 'neoplasm' with 0.3%. The main advantage of the ICPC is the fact of being a standardized tool. It is very suitable for classification of the reasons for demand for care in PHC according to their specificity, capacity to be used in a computerized medical file of the PHC. Its current limitations are related to the difficulty of classification of some reasons for demand for care. Conclusion: The ICPC has been developed to provide healthcare with a coding reference that takes into account their specificity. The CIM is in its 10th revision; it would gain from revision to revision to be more efficient to be generalized and used by the teams of PHC.

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