

Whatever comes through the door

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*An accident doesn't come with a bell
on its neck.*

– Finnish proverb¹

In general practice, we never know what might walk through the door. Injuries of all kinds and their sequelae are relatively common. On the same day, we might encounter a child with a sporting injury, an adult with a burn, a woman with a corneal foreign body, a man who needs assistance returning to work and a pensioner at risk of hip fracture from a fall. The variety and uncertainty inherent in general practice can be exciting and engaging.

Much of the care of those with injuries is performed by general practitioners (GPs). Bettering the Evaluation and Care of Health data have established that over four million musculoskeletal injuries per year are seen in general practice.² The assessment and management of care for 96% of workplace injuries is coordinated by GPs.³ Most wound care occurs in general practice – despite the associated financial challenges from limited Medicare Benefits Schedule funding.⁴ Rural GPs often treat injuries both in the clinic and in the rural emergency department.

Furthermore, GPs have a central role in injury prevention. General practice is an ideal setting to detect non-accidental childhood injury.⁵ Assessment of fracture risk^{6,7} and subsequent lifestyle⁸ along with pharmacological⁹ interventions significantly reduce the risk of fractures from falls in the elderly. Appropriate and judicious certification removes risky drivers from the road.¹⁰ Sensitive and

caring mental health consultations can preclude self-harm.

The injuries seen in general practice are not limited to the musculoskeletal system, an important aspect well reflected in this issue. Park and Burns have provided an update on button battery injury,¹¹ Heath Jeffery and colleagues have given an overview of ocular trauma¹² and Strelan and Crowley have written a systematic approach to the diagnosis and management of injuries to the thumb.¹³

The article by Carter and Hartridge highlights that injuries are not limited to the physical realm when they underscore the potential of electronic communication systems to cause unintended injury by breaching confidentiality.¹⁴

General practice stands at the forefront of injury prevention, initial management and follow-through. Its presence both averts the incidence and quells the sequelae of these often-unexpected incidences. It does so every day. Every morning begins with adventurous uncertainty – we don't know what will come through the door. But – whatever may – Australian general practice has got it covered.

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