

decision support. These results provide further evidence of both professional and public support for this approach.

As Srinivas *et al* point out, the weakness in telephone consultation lies in the area of history taking. It is in this area of patient assessment where decision support is of greatest value. For the record of the consultation to be of most use, particularly if litigation were to arise, it would seem highly desirable to have a complete record of the questions asked and the responses given. Provisional analysis of research that we are undertaking using simulation of calls has identified that nursing staff form a hypothesis as to the nature of the patient's problem early in the consultation.

This is then followed by a process of backward reasoning, gathering evidence to support the hypothesis rather than forward reasoning from symptoms to hypothesis. The approach to the assessment is related to the complexity of the task—the more complex the assessment, the less systematic the approach.³ If decision support in telephone consultation is to be of value it should delay the hypothesis generation and promote forward reasoning; it should also be designed to help the user to structure more complex consultations. Decision support systems need to be developed to enable this, while being sufficiently user friendly to be acceptable to staff.

R CROUCH
J DALE

*Accident and Emergency Department,
King's College Hospital, London*

- 1 Srinivas S, Poole F, Redpath J, Underhill TJ. Review of a computer based telephone Helpline in an A&E department. *J Accid Emerg Med* 1996;13:330-3.
- 2 Crouch R, Dale J, Patel A, Williams S, Woodley H. Ringing the changes: developing, piloting and evaluating a telephone advice system in accident & emergency and general practice settings. London: Departments of A&E Medicine and General Practice. King's College School of Medicine and Dentistry, 1996.
- 3 Corcoran SA. Task complexity and nursing expertise as factors in decision making. *Nursing Res* 1986;35:107-12.

Correction

An uncorrected scanning error occurred in the title of the abstract "Prehospital diazepam: an audit of use" in the last issue (volume 14, page 126), where "adult" was printed instead of "audit". Also the name of one of the authors (H Cosgrove) was omitted. The authors have informed us of an error in their analyses, which means that the data presented are incorrect, though the conclusions are unaltered. We understand that they will be submitting a definitive paper on this subject to the journal. This will be peer reviewed in the usual way.

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Details available from Total Trauma Care, c/o Conference Secretariat, Index Communications Meeting Services, Crown House, 28 Winchester Road, Romsey, Hampshire SO51 8AA. Tel: 01794 511331/511332; fax: 01794 511455.