

Using eConsults for Managing Women's Health

eConsults are an effective way to improve the quality of care for women's health.

In a primary care setting, eConsults can be used to:

- Reduce unnecessary costs by streamlining care
- Enhance the quality of comprehensive care
- Determine whether additional testing or follow-up is needed based on the patient's history or test results
- Provide follow-up recommendations for developing treatment plans, surveillance, and overall wellness



See how our Primary Care Partners have used RubiconMD to help their patients:

Gynecology

23-year-old female G4P3 with a history of anxiety, anemia, and hirsutism who presents with amenorrhea since miscarriage 11 months ago. Patient received a Depo-Provera injection 9 months ago and has a family history of PCOS.

Question: Is there any cause for amenorrhea indicated in her history or lab results? Can I offer this patient a progestogen challenge test?

Reproductive Endocrinology

32-year-old female G1P1 with a history of PCOS who has had severe acne, worsening hirsutism, and difficulty losing weight for the past 6 months. Patient had difficulty tolerating OCPs and metformin due to adverse mood effects and diarrhea, respectively. Spironolactone was discontinued by neurology due to intracranial hypertension.

Question: What other treatment/work-up can I offer this patient for her PCOS?

Reproductive Endocrinology

34-year-old female G1P1 with history of intrauterine insemination in Turkey. Patient now lives in the US and cannot afford to see a fertility specialist. She has been trying to get pregnant for over a year now using period/ovulation tracking.

Question: Do you have any advice on how to help this patient in our primary care clinic? Are there any medications you would recommend to help with her fertility?

Maternal-Fetal Medicine + Psychopharmacology

26-year-old female G1P1 with a history of depression and PCOS who suffered fetal demise at 33 weeks gestation due to hemorrhage of the umbilical cord. Prior to this, her entire pregnancy was low-risk, and monitoring was normal except for maternal obesity. Patient is currently struggling with hypersomnia, but wants to become pregnant again immediately.

Question: What is the safest antidepressant considering the patient wants to become pregnant soon? Do you have recommendations for preventing fetal demise/hemorrhage in a future pregnancy?

Maternal-Fetal Medicine + Clinical Pharmacy

30-year-old female G2P2 with a history of bipolar disorder and HSV who is currently formula feeding her 24-day-old infant, but would like to breastfeed. Patient is currently taking SSRIs, anticonvulsants, and acyclovir.

Question: Does anything on the patient's medication list preclude her from breastfeeding?

Bone and Mineral Disorders

84-year-old female with a history of osteoporosis in her wrist and osteopenia in her spine and hip. Prior history of a fall resulting in fracture. She took medication for osteoporosis a few years ago, but had associated jaw pain and the medication was discontinued.

Question: Can I offer the patient any other osteoporosis medications given her history of jaw pain with oral bisphosphonates?

Breast Oncology

65-year-old female with a history of right lumpectomy for stage 1, grade 2, HER2 negative ductal carcinoma. She underwent radiation and is currently on Arimidex. She is scheduled to see radiation oncology every month for the next year, but cannot afford to attend so many visits.

Question: What is the necessity of monthly follow-ups for the next year? Is this the usual standard of care, or is this excessive?

Infectious Diseases - STI Care

22-year-old female with no significant past medical history who presents with pelvic pain for the past 3 weeks. Relevant exams and labs include adnexal tenderness and elevated CRP. Patient diagnosed with PID, started on empiric therapy, and labs just came back positive for Mycoplasma genitalium.

Question: How do I interpret the CDC guidelines for M. genitalium treatment? Should her current partner be empirically treated, or tested with urine NAAT first?