

All patients referred to specialist clinics are assigned to a priority category based on their clinical need and related psychosocial factors. The examples given are indicative only and the clinician reviewing the referral will use their clinical judgement to determine the best service response for the patient.

REFERRAL GUIDELINES: VASCULAR SURGERY CLINIC

In order for us to be able to accept your patient for orthopaedic review and treatment, referring GPs/medical specialists are required to provide:



Essential Referral Content

Demographic

- Full name
- Address
- Date of birth
- [BMI](#)
- Indigenous Status
- Referring GP details
- Health Insurance
- Preferred language and interpreter requirements
- Medicare number
- Mobility needs

Clinical

- Clinic Specialty
- Reason for Referral
- Duration of symptoms
- [Required investigation results](#)
- Examination findings
- Comorbidities
- Relevant Past History
- Current medications
- Past surgery

Relevant Results

- CT/Medical Imaging
- MRI
- Ultrasound
- Pathology

Please address the referral to the Vascular Clinic and fax to the Outpatient Department on **03 8754 6710**.

REFERRAL PROCESS: VASCULAR CLINIC

 **STEP 1**

Essential referral content will be checked. You will be contacted if further information is required.

Acknowledgement of referral receipt will occur within eight working days.

 **STEP 2**

The referral will be triaged by the specialist unit according to clinical urgency.

This determines how long the patient will have to wait for an appointment.

 **STEP 3**

Patients with urgent conditions are scheduled to be seen within 30 days.

Patients with routine conditions are given the next available appointment according to clinical need.

Both the referrer and patient are notified.

Please Note: The times to assessment may vary depending on size and staffing of the hospital department.

If you have any queries, please contact us:

Werribee Mercy Hospital: Phone: 03 8754 6700 Fax: 03 8754 6710

EXCLUSION CRITERIA: **VASCULAR CLINICS**

The following Orthopedic conditions are not routinely seen at Werribee Mercy Hospital:

- Patients that are being treated for the same condition at another Victorian Public Hospital
- Patients with a BMI over 40 will be excluded from surgery at Werribee Mercy Hospital
- Patients with critical fistula flow to be referred to their treating hospital. Not seen at WMH

REFERRAL PROCESS: **VASCULAR SURGERY CLINIC**

The clinical information provided in your referral will determine the triage category. The triage category will affect the timeframe in which the patient is offered an appointment.

If the condition is required **immediate** assessment or admission a referral to the Emergency Department (ED) should be attended to. Please contact 03 8754 3000 and refer the patient to the ED for clinical review.

Urgent (seen within 30 days of referral receipt)	Non-urgent
<p>The patient has a condition that has the potential to deteriorate quickly with significant consequences for health and quality of life if not managed promptly. Examples include:</p> <ul style="list-style-type: none"> • Deteriorating claudicant • Wound infection • Non Urgent cases of Rest pain/Gangrene/Ulceration • Seroma/haematoma • AV fistula thrombosis – refer to treating hospital (renal unit) • Bypass Graft Occlusion – refer to tertiary hospital • Non Urgent Arm ischemia with non – critical limb 	<p>The patient’s condition is unlikely to deteriorate quickly or have significant consequences for the person’s health and quality of life if specialist assessment is delayed beyond one month. Examples include:</p> <ul style="list-style-type: none"> • Asymptomatic carotid stenosis <50% • Leg swelling for investigation • Evaluation of patients with DVT post receiving emergency care • Complication of Varicose veins (bleeding, Thrombophlebitis or Eczema) • Intermittent claudication with no signs of limb threatening ischemia • Asymptomatic carotid stenosis • Elective renal access surgery • Asymptomatic Lymphedema • Excessive sweating of hands or feet • Uncomplicated varicose veins.

SPECIFIC INVESTIGATIONS: VASCULAR SURGERY CONDITIONS

Immediate assessment or admission criteria (not an exhaustive list)

Step 1: Check criteria for immediate assessment or admission.

- New onset of TIA/CVA
- Crescendo or multiple TIA/RIND (reversible ischaemic neurological disability)
- Ischaemic and threatened limb
- Stenosis of internal carotid(duplex scan positive) with TIA/RIND or amaurosis fugax
- Popliteal aneurysm > 2.0cm diameter
- Any changes to aneurysm (abdominal or aortic)
- Axillary vein thrombosis
- Acute Ischaemic changes, tissue loss or gangrene contact ED
- Deep Vein Thrombosis (DVT)
- Rest pain or ischaemic changes
- Ascending thrombophlebitis to level of the saphenofemoral junction
- Any patient who is unwell or hemodynamically unstable
- Any patient who does not fit into the Urgent category 1 waiting guidelines who needs specialist review
- Pulmonary embolism (PE)

Step 2: Contact the Emergency Department Admitting Officer (AO) via the switchboard: 03 8754 3000.

Step 3: Follow up your phone call by faxing a referral to the emergency department including all relevant investigations to the number the AO provides.

Reason	Required Investigations
Claudication	<ul style="list-style-type: none"> Duplex Ultrasound of lifestyle limiting claudication or worse.(essential with referral)
	<ul style="list-style-type: none"> CXR +/- CT Abdomen/pelvis (where appropriate)
	<ul style="list-style-type: none"> Recent FBE; U&E's: ESR: LFT: Fasting Glucose; Lipid profile (essential with referral)
Varicose veins including thrombophlebitis	<ul style="list-style-type: none"> Recent FBE; U&E's; Lipid profile; Creatinine in patients over 50yrs of age(essential with referral)
<i>Treatment for cosmetic management of varicose veins including sclerotherapy is NOT provided at the Werribee Mercy Clinic</i>	<ul style="list-style-type: none"> Venous duplex scanning (essential with referral) Consider graduated stockings where applicable
	<ul style="list-style-type: none"> FBE, ESR & CRP if inflammation suspected (essential with referral)
Axillary vein Thrombosis	<ul style="list-style-type: none"> Recent FBE;U&E's; LFT (essential with referral)
	<ul style="list-style-type: none"> Doppler ultrasound (essential with referral)
Carotid disease	<ul style="list-style-type: none"> Recent FBE; U&E; Lipid profile (essential with referral)
	<ul style="list-style-type: none"> X-rays (AP and Lateral) (essential with referral)
	<ul style="list-style-type: none"> Carotid ultrasound (essential with referral) +/- Carotid angiography
Peripheral vascular disease	<ul style="list-style-type: none"> Recent FBE; U&E's Lipid profile (essential with referral)
	<ul style="list-style-type: none"> Duplex U/Sound. (essential with referral)

Reason	Required Investigations
	<ul style="list-style-type: none"> • Angiography +/- CT scan
Leg/foot Ulcers. Non healing wounds	<ul style="list-style-type: none"> • Recent EFT; U&E; blood glucose for diabetics (essential with referral) • Recent wound swab (essential with referral)
	<ul style="list-style-type: none"> • Consider FBE
Rest pain or ischaemic changes	<ul style="list-style-type: none"> • Any urgent cases refer to the emergency department • Recent FBE, U&E (essential with referral) • Doppler ultrasound (essential with referral) • Ultrasound +/- CT scan
DVT	<ul style="list-style-type: none"> • Any new/urgent cases to be referred to the emergency department
TIA/CVA	<ul style="list-style-type: none"> • Any new/urgent cases to be referred to the emergency department
Aortic or abdominal aneurysms	<ul style="list-style-type: none"> • Any new/urgent cases to be referred to a tertiary emergency department

INTERPRETING SERVICES

A proportion of our patients have limited or no proficiency in English. In these cases, we engage professional interpreters for communication with our clinicians. To enable access to an appropriate interpreting service, please ensure that your referral includes information on the patient's preferred spoken language and their need for an interpreter.

Werribee Mercy Hospital - Outpatient Clinics

300 Princes Hwy, Werribee VIC 3030

Phone 03 8754 6700 Fax: 03 8454 6710