


HealthPathways


Referral to General Medicine

Acute Referrals via Emergency Department

1. Refer via:

-  ERMS: Emergency Department Referral, or
- Fax your referral to **(03) 687-2133**.

2. Include:

-  [standard referral information](#)
- management taken and reason for referral
- medications and past medical history
- how the patient will be arriving at the Emergency Department.

3. If high clinical concern, contact the on-call General Surgical or Emergency Department consultant, phone **(03) 687-2100** to confirm your referral.

4. You may also wish to give a copy of the referral to the patient to take to the Emergency Department.

5. If the case is complex, phone **(03) 687-2132** for advice.

Outpatient Referrals

Urgent

1. Phone the on-call consultant **(03) 687-2100**.

2. Follow up your phone call by sending your referral via:

- Timaru Hospital Outpatient Appointment Office, or
-  ERMS > General Medicine Referral, or
- Fax to **(03) 687-2129**

3. Include  [standard referral information](#), plus

Standard referral information

When referring to any hospital department, include the following information:

Patient Details:

- Name, address, phone, and cell phone number
- Date of birth and NHI number
- Interpreter required?
- State if the patient is not a New Zealand resident
- ACC number and date of injury if relevant

Clinical Details:

- Reason for referral
- History and co-morbidities
- Examination findings
- Investigations carried out and results
- Options already pursued
- Current medications

- Allergies

General Practitioner Details:

- Name and practice
- Practice address, phone, and fax numbers
- Patient's usual general practitioner (if different from above)

Note – Specific conditions may require more information. Check the relevant pathway's referral section for details. Computer-generated consultation notes are not a suitable substitute for a referral letter. Do not make simultaneous referrals to other departments for the same problem as this can lead to multiple appointments.

- a detailed account of the history and the important findings of your physical examination.
- other information relevant to the condition if stated in the referral pathway.
- what you would like the General Medicine Outpatient Department to do for your patient.

Non-urgent

1. Send your referral via:

- Timaru Hospital Outpatient Appointment Office, or
-  ERMS > General Medicine Referral, or
- Fax to **(03) 687-2129**

2. Include  [standard referral information](#), plus

Standard referral information

When referring to any hospital department, include the following information:

Patient Details:

- Name, address, phone, and cell phone number
- Date of birth and NHI number
- Interpreter required?
- State if the patient is not a New Zealand resident
- ACC number and date of injury if relevant

Clinical Details:

- Reason for referral
- History and co-morbidities
- Examination findings
- Investigations carried out and results
- Options already pursued
- Current medications
- Allergies

General Practitioner Details:

- Name and practice
- Practice address, phone, and fax numbers
- Patient's usual general practitioner (if different from above)

Note – Specific conditions may require more information. Check the relevant pathway's referral section for details. Computer-generated consultation notes are not a suitable substitute for a referral letter. Do not make simultaneous referrals to other departments for the same problem as this can lead to multiple appointments.

- a detailed account of the history and the important findings of your physical examination.

- other information relevant to the condition if stated in the referral pathway.
- what you would like the General Medicine Outpatient Department to do for your patient.

Phone/Fax Advice

To contact the on-call general medicine physician phone **(03) 687-2100**.


Fax advice is via the Timaru Hospital Outpatient Appointment Office, fax to **(03) 687-2129**.

If you wish to speak to a specific consultant, phone [their department](#) during normal business hours.

Categories and Wait Times

General Medicine thresholds are reviewed frequently, see FSA timeframes. These are estimates only and change regularly depending on resources available.

1. **Acute (Emergency Department)** - seen immediately

- Severe illness requiring immediate medical attention
-  [Examples](#)


Seen within 24 hours (Examples)

- Undiagnosed collapse
- Undiagnosed shortness of breath
- **Heart failure** (not already known to the Cardiology Department).
- **Stroke** and aged > 65 years.
- Respiratory causes e.g., **pneumonia**, severe asthma, **pulmonary embolism**, respiratory failure (not already known to the Respiratory Department).
- Infection e.g., **cellulitis**, septicaemia, **pyelonephritis** (and aged > 40 years), meningitis.
- Significant dehydration which may be associated with vomiting or diarrhoea, but not suspected bowel obstruction.
- Delirium and acute confusion that is unable to be managed in the community

Not seen

- Aged > 65 years with multiple chronic problems requiring interdisciplinary assessment – request older persons health assessment, which will not usually be available on the same day.

2. **Urgent A**

- Major risk if treatment delayed
- Severe or progressive undiagnosed problem where condition potentially serious
- Uncontrolled, acute and/or severe symptoms and /or major functional impairment
-  [Examples](#)

Within 5 working days (examples)

- Shortness of breath
- Infectious and inflammatory conditions e.g., **pneumonia** or **cellulitis** which are slow to settle (and not already known to Infectious Diseases Department)
- Undifferentiated malignancy
- Pyrexia of unknown cause
- Syncope or collapse
- Mild to moderate heart failure
- Infectious or inflammatory conditions

- General practitioner assesses patient as “not sick enough for urgent admission but needs urgent assessment”.

Within 3 months

Chronic medical conditions, for example:


- **Funny turns**, syncope, severe dizziness
- Resistant hypertension
- Unexplained weight loss
- Unexplained fatigue or tiredness
- Multi-system disease

-  [Exclusions](#)

Rapid Response Clinic Exclusions:

- TIAs - see [TIA pathway](#)
- Multiple chronic problems in a patient > 65 years requiring multidisciplinary assessment - refer to [Older Person's Health Specialist Services](#).
- Patients clearly requiring specialist assessment - refer to the appropriate specialty.


3. Urgent B

- Possible risk if treatment is delayed
- Severe or progressive problem where timely review is advisable
- Hard to control, and/or severe symptom, and/or major functional impairment
-  [Examples](#)

Urgent B referral examples:

- Symptomatic thyrotoxicosis
- Sub-acute neurological deficit
- Sub acute renal / liver failure

4. Semi-urgent A


- Unexpected deterioration of known condition
- Symptoms causing significant social / economic / functional impairment
- General practice diagnosis probable but further investigation or specialist confirmation required and condition is potentially serious, particularly if assessment or treatment is delayed
- Hospital admission possible if patient is not evaluated promptly
-  [Examples](#)

Semi-urgent A referral examples

- Cardiology
 - Severe angina
 - Recurrent syncope
 - Poorly controlled heart failure
 - Cardiac murmurs with severe symptoms
- Pre-op assessment for urgent non-cardiac surgery
- Exacerbation of IBD
- Recurrent seizures / syncope with LOC

- Significant laboratory abnormality
- Symptomatic exertional chest pain


5. Semi-urgent B

- Deterioration of known condition
- Symptoms causing significant social, economic, and/or functional impairment
- General practice diagnosis probable, but further investigation or specialist confirmation required and condition is potentially serious, particularly if assessment or treatment is delayed
- Hospital admission possible if the patient is not evaluated
-  [Examples](#)

Semi-urgent B referral examples

- Stable angina
- Atrial Fibrillation and supraventric tachycardia
- Isolated syncope
- Murmurs and minor symptom

6. Routine

- Non urgent chronic conditions
-  [Examples](#)

Non-urgent referral examples

Chronic medical conditions, for example:

- Poorly controlled hypertension
- Unexplained weight loss
- Unexplained tiredness
- Multi-system disease
- **Funny turns**

Page Information

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