

# REFERRAL GUIDELINES

## General Surgery - Hernia Clinic

**Head of Unit:** **Kumar Sundaramuthy**

**Referrals:** Referral addressed to named head of unit is preferred.

The GP Referral Template located within the Mastercare Referralnet system is the preferred referral tool.

For faxed referrals: **FAX 9788 1879**

### Clinic overview:

We provide surgical interventions for :Hernia`s e.g. Inguinal, umbilical, incisional.

### Categories for Appointment :

	Clinical Description	Timeframe for Appt
<b>Emergency</b>	<p>Patients with signs and symptoms requiring emergency review</p> <ul style="list-style-type: none"> <li>Incarcerated and symptoms of bowel obstruction, local tenderness or erythema</li> <li>Strangulated hernia</li> </ul>	<b>Immediate via Emergency Department</b>
<b>Category 1 Urgent</b>	<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</p> <ul style="list-style-type: none"> <li>Hernia required acute reduction</li> <li>Symptomatic hernia containing bowel</li> <li>Suspected soft tissue malignancy</li> </ul>	<b>As per triage 1-2 weeks</b>
<b>Category 2 Semi-Urgent</b>	<p>The patient has a condition that has the potential to deteriorate quickly with significant consequences for health and</p>	<b>Within 3 months Dependant of severity</b>

### IMPORTANT:

The following referral information is mandatory:

#### Referral:

- Date of referral
- Speciality
- Referring practitioner name
- Provider Number
- Referrer's signature

#### Patient Demographic:

- Full name
- Date of birth
- Postal address
- Contact numbers
- Medicare Number
- Interpreter Required

#### Clinical:

- Reason for referral
- Duration of symptoms
- Management to date
- Past medical history
- Current medications
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- Diagnostics as per referral guidelines

#### Preferred:

- Addressed to named practitioner
- Duration of referral (if different to standard referral validity)
- Next of kin
- Email address

#### HEAD OF UNIT

**Kumar Sundaramuthy**

#### PROGRAM DIRECTOR

**Peter Evans**

#### ENQUIRIES

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	quality of life if not managed promptly <ul style="list-style-type: none"> <li>Uncomplicated hernia with pain</li> </ul>	
<b>Category 3 Routine</b>	The patient's condition is unlikely to deteriorate quickly or have significant consequences for the person's health and quality of life if the specialist assessment is delayed beyond one month <ul style="list-style-type: none"> <li>Uncomplicated hernia</li> </ul>	<b>Waiting List</b> (next available) If patient symptoms deteriorate, please re-refer and note : patient already on appointment wait list ,request for a triage review.

### Minimum Referral Information Required:

Please note, referral cannot be processed if minimum information is missing

- Referring practitioner name, provider number and signature.
- Date of referral
- Patient's name, address, date of birth, Medicare number and phone number.
- Clinical details and reason for referral
- Duration of symptoms
- Include details of lesion/lumps :location, size, site, duration or changes noted
- Relevant medical history
- Medications
- Allergies

### Additional Clinical Information for Specific Conditions:

#### Hernia:

#### Clinical history :

- Pain in groin sometimes precedes lump.
- Pain may be colicky and associated with vomiting (intestinal obstruction)
- Lump in groin - may be intermittent /reducible but is usually most obvious when patient is standing Diagnostic studies may include:

#### Management/Investigation:

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- N/A

### **Inguinal & Femoral Hernia**

#### **Clinical History:**

- Presentation: lump anatomically consistent with inguinal or femoral hernia.
- Careful clinical examination, both lying and standing, is the most important method of assessment.
- If a hernia is not detectable either by the patient or doctor, the diagnosis of a hernia cannot be made with confidence.
- DO NOT REFER FOR ULTRASOUND See groin pain

#### **Management :**

- Trial of a hernia truss may be appropriate
- Conservative management may be considered in the elderly or those with severe comorbidities.
- Surgical referral is appropriate

**Groin Pain** Note: Surgical referral is not appropriate

#### **Clinical History:**

- Patients who present with groin pain and no lump will most likely be suffering from a groin strain, osteitis pubis or other enthesopathy.
- DO NOT REFER FOR ULTRASOUND

#### **Management**

- Surgical referral is not appropriate
- Treatment is symptomatic
- Referral to sports physician may be of value
- Review by GP is appropriate

**Other Groin Lump** – Node, Varix, etc.

#### **Clinical History:**

- Diagnosis based on history and clinical examination
- An ultrasound is appropriate in these circumstances Management Options for GP
- Surgical referral is appropriate

### **Incisional /Ventral**

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### Clinical History:

- History of previous surgery.

### Management/Investigation :

- CT Imaging
- Assessment of comorbidities ,smoking habits and weight is critical
- Examination confirms hernia
- Consider elastic abdominal binder
- Be aware that success of surgical treatment depends on minimising comorbidities and cessation of smoking
- Surgical outcomes are poor for patients with a BMI over 30
- In the absence of symptoms please do not refer unless these criteria are achieved

### Umbilical ,Para-umbilical, Epigastric

#### Clinical History:

- History and examination confirm presence of hernia
- Ultrasound is unhelpful

#### Management :

- Weight reduction if required
- Conservative management may be considered in some patients
- Surgical referral is usually appropriate

### Other Abdominal Hernia e.g. Spigelian, Lumbar

#### Clinical History:

- Occasionally diagnosed clinically

#### Management / Investigation:

- CT scan & Surgical referral is appropriate

### **Exclusions:**

- < 18 years- Refer children to paediatric surgery clinic.
- Bariatric Surgery - Consider other public specialist bariatric surgery service
- Divarication of recti

### **Eligibility Criteria:**

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General surgical conditions for example: <ul style="list-style-type: none"><li>Hernia repairs – epigastric, inguinal, incisional, umbilical ,large ,recurrent, femoral</li></ul>
<b>Alternative referral options:</b>
<ul style="list-style-type: none"><li>For GORD requiring surgical intervention, hiatus hernia, para-oesophageal hernia refer to Upper GI Clinic</li><li>If suspicion of a femoral or iliac aneurysm urgent referral to Vascular Surgery is appropriate</li><li>Private Sector</li></ul>
<b>Clinic information:</b>
<ul style="list-style-type: none"><li>Hernia Clinic:</li><li>Monday: 13:30-17:00</li><li>Wednesday: 09:00- 13:00 &amp; 13:30 -17:00</li><li>Location :Outpatient Department- Integrated Health Centre -Hastings Road Frankston</li><li>Phone: 9784 2600</li><li>Fax: 9788 1879</li></ul> <p><i>Please Note; The referral should not be given to the patient to arrange an appointment. No appointments can be made over the phone. Once a referral has been received the patient is notified by mail of the date and time of her appointment</i></p>

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