# REFERRAL GUIDELINES

## Pain Medicine Clinic

Head of Unit: Dr Tony Weaver

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

**E-referral using the GP Referral Template** located within the Mastercare Referralnet system is preferred.

Referral via ACCESS Phone: 1300 665 781

ACCESS Fax: 9784 2309

Peninsula Health Integrated Pain Service Referral Form

#### 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.

#### Clinic overview:

Peninsula Health Integrated Pain Service is comprised of the <u>Persistent Pain Management Service (PPMS)</u> at the Mornington Centre and the <u>Pain Medicine Clinic (PMC)</u> at Frankston Hospital Outpatients.

Clients are referred to the Peninsula Health Integrated Pain Service and will then be triaged to either PPMS or PMC.

The Persistent Pain Management Service offers medical and allied health input to clients who have been experiencing pain for more than 6 months. Assessment is multi-disciplinary, and programs are individualised, with 1:1 and group programs offered. The team consists of psychology, occupational therapy, physiotherapy, nursing and doctors. The service recognises the interaction of biological, psychological and social factors in the experience of pain.

Allied Health intervention aims to reduce the impact of chronic or persistent pain by promoting active, self-management and maximising function. This requires clients to be open to self-reflection and behaviour change and be able to put recommended techniques into practice themselves. Hands-on treatment is not offered.

#### 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

#### Clinical:

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

#### Preferred:

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

## **HEAD OF UNIT**

Dr Tony Weaver

#### PROGRAM DIRECTOR

Dr Velandai Srikanth

#### **ENQUIRIES**

ACCESS 1300 665 781 Reviewed: 30.01.2021

# REFERRAL GUIDELINES

## Pain Medicine Clinic

Medical input is available if selected by clients to either optimise medication management or advise on interventional treatment (eg/injections). If interventional treatment is recommended this will be followed up through the <u>Pain Medicine Clinic</u> and Frankston Hospital.

<u>The Pain Medicine Clinic</u> may see clients who have experienced pain for less than 6 months if it is considered that it will prevent the development of a persistent pain condition.

### **Categories for Appointment**

	Clinical Description	Timeframe for Appt
Category 1 Urgent	Employment in jeopardy; client in carer role; early CRPS; pain < 3 months (PMC); Post procedure and post inpatient stay	1-3 months
Category 2 Routine	All chronic pain referrals	6 months
Emergency	When signs and symptoms require emergency management	Immediately via Emergency Department

## **Eligibility Criteria**

- Aged 18 years and over
- Current management plan for underlying conditions related to the chronic pain eg/ Diabetes, Multiple Sclerosis
- The client has a GP who is prepared to work with the Peninsula Health Integrated Pain Service and provide ongoing community management

#### **Exclusions**

Compensable clients will be encouraged to attend elsewhere

## Alternative referral options

- Other public pain clinics operate at Kingston Centre (>65y), Caulfield, St Vincent's, Austin, Royal Melbourne and Western Hospitals
- Caulfield Pain Management Service (Alfred Health): Phone: 9076 6834 / Fax: 9076 4060
- The Kingston Centre Pain Clinic (Monash Health): Phone: 1300 342 273 / Fax: 9594 2273
- Local Private services as per directory

#### 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

#### Clinical:

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

#### Preferred:

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

#### **HEAD OF UNIT**

**Dr Tony Weaver** 

#### PROGRAM DIRECTOR

Dr Velandai Srikanth

#### **ENQUIRIES**

ACCESS 1300 665 781 Reviewed: 30.01.2021

# REFERRAL GUIDELINES

## Pain Medicine Clinic

### **Specific Clinic referral information**

- Referral must be addressed to named practitioner –Dr Tony Weaver
- Referring practitioner name, provider number and signature
- Date of referral
- Period for which referral is valid (if different to standard referral validity) –indefinite referral preferred
- Patient's name, address, date of birth, Medicare number and phone number/s
- Clinical details and reason for referral
- Relevant medical history
- Medications
- Allergies
- Results of all recent and relevant investigations especially IMAGING

### **Clinic information**

Referral via ACCESS

Referrals accepted from medical doctor, GP or medical specialist to

 ACCESS Phone: 1300 665 781 ACCESS Fax: 9784 2309

Peninsula Health Integrated Pain Service Referral Form

Self-referrals are not accepted

PPMS offers appointments 4 days per week (Mon/Tues/Thurs/ Fri) 0900-1600

 The Mornington Centre Corner Tyalla Grove & Separation Street Mornington 3931 Chronic Pain Management Service (03) 5976 9014•PMC offers appointments one morning per week (Wednesday 9-12) Frankston Hospital Outpatients

#### Other Information

Pain Australia

http://www.painaustralia.org.au/ Pain Link Helpline: 1300 340 357

Chronic Pain Australia

http://chronicpainaustralia.org.au/

Agency for Clinical Innovation (ACI) Pain Management Network <a href="http://www.aci.health.nsw.gov.au/chronic-pain">http://www.aci.health.nsw.gov.au/chronic-pain</a>

painHEALTH – Musculosketal pain help <a href="https://painhealth.csse.uwa.edu.au/">https://painhealth.csse.uwa.edu.au/</a>

#### 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

#### Clinical:

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

#### Preferred:

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

#### **HEAD OF UNIT**

Dr Tony Weaver

#### PROGRAM DIRECTOR

Dr Velandai Srikanth

#### **ENQUIRIES**

ACCESS 1300 665 781 Reviewed: 30.01.2021