

REFERRAL GUIDELINES

Severe COPD

Head of Respiratory Unit: **Prof David Langton**

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.

For faxed referrals: FAX **97881879**

Clinic overview:

There is no separate COPD clinic. Your patient will be given an appointment in another respiratory clinic based on clinical need and appointment availability for patients with COPD with special needs or complications including.

- (i) home oxygen evaluation
- (ii) CPAP
- (iii) pulmonary embolism
- (iv) pneumonia
- (v) lung cancer/lung nodules which need evaluation.

Categories for Appointment

	Clinical Description	Timeframe for appt
Category 1	Severe symptoms requiring specialist management	Months
Category 2 Routine	N/A	N/A
Emergency	There are signs of a severe current COPD exacerbation	Patient should be referred to the Emergency Department

Eligibility Criteria

COPD patients with special needs and complications such as

- (vi) home oxygen evaluation

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

Prof David Langton

PROGRAM DIRECTOR

Dr. Gary Braun

ENQUIRIES

03 9784 7058

Reviewed: December 2023

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- (vii) CPAP
- (viii) pulmonary embolism
- (ix) pneumonia
- (x) lung cancer/lung nodules which need evaluation.

Exclusions

- Patients with COPD without special needs or complications

Please note; Due to the high demand and limited appointments available, our appointments for patients with severe COPD with special needs and complications are booked to capacity several months in advance. Referrals that do not meet any of the above eligibility criteria will regrettably be declined.

Alternative referral options

Pulmonary Rehabilitation Program

Private services

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
- Relevant medical history
- Medications
- Allergies
- Results of all recent and relevant investigation
- Results of lung function test

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