**ERH Gynaecology Referral Procedure Specialist Clinics**

This is a public outpatient service with no out of pocket cost for consumers.

**Referrals**

Referrals are accepted from **GP or health professional**

All referrals must meet State-wide referral Criteria - [Minimum information for referrals to non-admitted specialist services | health.vic.gov.au](https://www.health.vic.gov.au/patient-care/minimum-information-referrals-non-admitted-specialist-services)

All referrals **must include: see Statewide referral criteria for specific Gynaecological requirements** [Specialities | src.health.vic.gov.au](https://src.health.vic.gov.au/specialities)

A general practitioner (GP) referral to a specialist lasts 12 months from the specialist’s first meeting with the patient unless a different duration is noted on the referral instrument.

GPs can refer beyond 12 months or indefinitely if the patient needs ongoing care. However, a new referral is needed if the patient has a new or unrelated condition while on an indefinite referral.

**Eligibility Criteria/ Conditions seen by Gynaecologist**

Heavy Menstrual bleeding, fibroids, post-menopausal bleeding, intermenstrual and post-coital bleeding, female bladder symptoms, pelvic organ prolapse, infertility, amenorrhea/oligomenorrhea, menopause, premature or surgical menopause, ovarian cyst, polycystic ovarian syndrome, pelvic pain including endometriosis, vaginal discharge, vulval disorders including chronic vulvitis

We do not currently offer gynaecology support or consultation for Cosmetic gynaecology, reversal sterilization procedures, transgender and gender reassignment surgery or termination procedures.

**Referral rejection**

Specialist Clinic may decline a referral when:

* Referrals that do not meet the Statewide Referral Criteria or is incomplete
* Conditions not relevant to gynaecology services

**Receiving and managing referrals**

Screening of referral suitability – within 8 working days

clinical prioritisation – within 8 working days

Referral acceptance/rejection/redirected – within 8 working days

Referral acknowledgement to referrer – within 8 working days

Appointment time (urgent) or placed on waiting list (routine) – within 8 working days

**Clinical Prioritisation/Triage categories**

Urgent – seen within 30 working days

Routine – placed on waitlist and seen within 12-14 months following the ‘next in turn’ policy

**Written Communication**

Progress letter sent within 8 working days to referrer/GP following each appointment.

Discharge letter sent to referrer/GP - within 8 working days following final appointment

**Waitlist**

Waitlist is reviewed regularly.

Patients that have been on waitlist 12+ months will be contacted via telephone at a 6-month interval to establish if they are still requiring an appointment and update any details.

Updated referrals will be reviewed by specialist and triaged accordingly.

**Appointment Scheduling**

Appointments are made via telephone with option for confirmation of appointment time and date provided to patient in writing.

A reminder text message is sent to patient 24 hours prior to scheduled appointment