

ERH Endocrinologist referral process Specialist Clinics

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

Referrals

Referrals are accepted from GP or medical professional

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

All referrals **must include**:

- Recent pathology results - Urine ACR, HbA1c, Biochemistry / UEC, FBE, & Lipid profile.
- Reason for referral.
- All medicines previously tried, duration of trial and effect
- Known complications or comorbidities (e.g. cardiovascular disease, kidney disease, retinopathy, cerebral vascular disease, nerve damage in the lower limbs, anxiety, depression, foot ulcers)
- Current and complete medication history (including non-prescription medicines, herbs and supplements)
- Urea and electrolyte results
- Creatinine blood results
- Albumin to creatinine ratio (ACR) urine results
- Liver function results
- Lipid profile results.
- Functional impact of symptoms on daily activities including impact on work, study or carer role
- If the person identifies as an Aboriginal and Torres Strait Islander

Conditions seen by endocrinologist

General endocrine conditions

Type 1 diabetes

Type 2 diabetes

Insulin Pump Therapy

Continuous Glucose monitoring

Heavy vehicle license renewal – will only be completed if patient is known to the specialist and via a face to face appointment.

Referral rejection

Specialist Clinic may decline a referral when:

- Conditions not relevant to endocrinology
- Absence of pathology

Receiving & managing referrals

Screening of referral suitability – within working 8 days

Referral acceptance/rejection/redirected – within 14 working days

clinical prioritisation – within 14 working days

Referral acknowledgement to referrer– within 14 working days

Appointment time (urgent) or placed on waiting list (routine) – within 14 working days

Clinical Prioritisation/Triage categories

urgent / next available - within 30 working days

Routine – appointment within 365 days following the ‘next in turn’ policy

Written Communication

Progress letter sent to referrer/GP following first visit - within 8 working days

Progress letters sent to referrer/GP following each appointment - within 8 working days

Discharge summary sent to referrer /GP – within 8 working days following final appointment

Waitlists

Waitlist is reviewed regularly and patients will be contacted every 12-16 weeks to establish if patient is still requiring an appointment. Patients that have been on waitlist 12+ months will be contacted at a 6-month interval to establish if they are still requiring an appointment and update any details

Updated referrals will be reviewed by the specialist and triaged accordingly.

Appointment Scheduling

Face to face appointment length:

New referrals first appointment – 40 minutes

Review appointments – 30 minutes

Telehealth appointment length:

New referrals first appointment – 30 minutes

Review appointments – 20 minutes

Face to face and telehealth appointments – the specialist will recommend the type of appointment best suited to condition at triage

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