

GYNAECOLOGY

National Access Criteria for First Assessment [ACA]

Category Definitions : These are recommended guidelines for hospital specialists prioritizing referrals from primary care.

1. Immediate - *acute admission to be arranged*
2. Urgent - *to be seen at next available clinic or within 2 weeks*
3. Semi-urgent - *within 4 weeks*
4. Routine - *within 16 weeks*

Immediate and Urgent cases must be discussed with the Specialist or Registrar in order to get appropriate prioritisation and then a referral letter sent with the patient, faxed or e-mailed (there may be local variety to this). The times to assessment may vary depending on size and staffing of the hospital department.

NATIONAL REFERRAL GUIDELINES : GYNAECOLOGY		
Category	Criteria	Examples (not an exhaustive list)
2. Urgent	<ul style="list-style-type: none"> • Diagnosed or suspected malignancy 	<ul style="list-style-type: none"> • highly abnormal cervical smear with cervical lesion • post menopausal bleeding • gestational trophoblastic disease • genital lesions or pelvic masses highly suspicious of cancer
	<ul style="list-style-type: none"> • Major functional disturbance 	<ul style="list-style-type: none"> • large masses causing symptoms • heavy vaginal bleeding with severe anaemia
	<ul style="list-style-type: none"> • Pain requiring narcotic or high levels of analgesia 	
3. Semi - Urgent	<ul style="list-style-type: none"> • Pelvic masses with low risk of malignancy 	<ul style="list-style-type: none"> • Ovarian cysts > 5cms
	<ul style="list-style-type: none"> • HGSIL of cervix 	
	<ul style="list-style-type: none"> • Vulval abnormalities 	<ul style="list-style-type: none"> • Pruritus vulvae
	<ul style="list-style-type: none"> • Anaemia 	
	<ul style="list-style-type: none"> • Moderate functional impairment 	<ul style="list-style-type: none"> • Procidentia
	<ul style="list-style-type: none"> • Chronic PID 	
4. Routine	<ul style="list-style-type: none"> • Menorrhagia 	
	<ul style="list-style-type: none"> • Gynaecological disorders with limited functional impairment 	<ul style="list-style-type: none"> • Dysmenorrhoea • Premenstrual symptoms • Genital prolapse • Abnormal uterine bleeding
	<ul style="list-style-type: none"> • Fertility 	<ul style="list-style-type: none"> • Infertility
	<ul style="list-style-type: none"> • Endocrine dysfunction 	<ul style="list-style-type: none"> • Amenorrhoea • Hirsutism • P.C.O. • Endometriosis
	<ul style="list-style-type: none"> • Other non urgent problems 	<ul style="list-style-type: none"> • Congenital abnormalities
	<ul style="list-style-type: none"> • LGSIL of cervix 	