

PAEDIATRIC SURGERY

National Access Criteria for First Assessment [ACA]

PRIORITISATION OF OUTPATIENT REFERRALS

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

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| 1. Urgent | - seen <i>within 1 week or at next specialist clinic</i> |
| 2. Semi - Urgent | - seen <i>within 4 weeks or at next specialist clinic</i> |
| 3. Routine | - seen <i>within 12 weeks</i> |

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. The times to assessment may vary depending on size and staffing of the hospital department.

1: URGENT

- Life threatening
- Major diagnostic doubt
- Complications could ensue if left
- Condition could get worse if left
- Major parental anxiety

2: SEMI-URGENT

- Non-urgent, but appropriate time for treatment
- Complications unlikely, but condition causing troublesome or minor symptoms

3: ROUTINE

- Reassurance only likely, no specific treatment
- Condition will not get worse
- Referral well before appropriate time of treatment
- No complications likely

Requests for ritual circumcision are not seen