

## 1 Waikato Hospital Acute Referral Process

- Mea culpa! Please note an error in the email address printed in the July Outreach for feedback on the new system. It should have been [watsonma@waikatodhb.govt.nz](mailto:watsonma@waikatodhb.govt.nz). Mark Watson is grateful for all the feedback received to date and can also be contacted on 021 471 798.
- Thank you for continuing to fax through the referral letter to the emergency department on 07 839 8907 after speaking to the speciality registrar. This allows medical records to be requested and some other pre-entry of information so that some time is saved when the patient actually arrives.

## 2 Older Persons and Rehabilitation Service Single Point of Entry

From 1 August 2005 the single point of entry for all referrals to the Waikato DHB Older Persons and Rehabilitation Service (OPRS) will be via:

Phone 0800 500199

Fax 0800 500181

[olderpersons@waikatodhb.govt.nz](mailto:olderpersons@waikatodhb.govt.nz)

This applies to all referrals to OPRS from throughout the Waikato DHB region, i.e. Waikato, King Country, Thames/Coromandel and Hauraki).

*For adults and children without an age-related need please continue to use the existing process, i.e. referral to Disability Support Link (DSL) for needs assessment and service co-ordination.*

Detailed information including copies of the referral form and entry criteria have already been sent to all GPs. If you have not received this or require any further information please use the contact points listed above.

## 3 Request from Ophthalmology

Patients referred acutely during office hours (0800-1600) are fitted into the acute clinic. Depending on the urgency of the problem there may be some delay in them being seen. Sometimes the wait can be to an hour or more. The service would be most grateful if GPs could forewarn patients of the possible wait.

## 4 ...And from Gynaecology

Just a reminder that pregnant women less than 20 weeks gestation should be referred to the gynaecology rather than obstetric registrar.

## 5 General Medical Teams

You may have noticed from discharge summaries that general medical patients are

under the care of teams i.e. pink, gold etc, rather than individual consultants. This reflects the way that the service organises specialist cover. If you wish to contact a specialist about a patient simply tell switch board which team you need and they will put you through to the appropriate specialist.

For information the current teams are;

Pink	Dr Peter Dunn Prof. David Simmons
Green	Dr Louise Wolmaranas Dr Justina Wu
Orange	Dr Paul Reeve Dr Ehlam Reda
Gold	Dr Pierre DeVilliers
Blue	Dr George Waxter

## 6 Welcome.....

**Kamal Solanki**, who has joined the rheumatology service, is originally from Fiji and has worked in Fiji, Australia, New Zealand and the UK. His particular interests are psoriatic arthritis, ankylosing spondylitis and scleroderma.

**Srini Yellapu** has joined general surgery in a locum capacity for six months. After graduating in India, Srini trained in the UK and Australia and gained fellowships from both the English and Australian Royal Colleges. His main interests are endoscopy and laparoscopic and colorectal surgery.

## 7. Info for Outreach update:

### Thames Demolition

The first phase of demolition of the rear ward block at Thames Hospital is complete. A community 'demolition party,' attended by 150 people, was held on 5 August to commemorate the start of the inpatient unit project. Carparking and wayfinding at the Hospital are largely unaffected.

### Shuttlebug Signage

The new golf buggies - Shuttlebugs - at Waikato Hospital have been a hit with patients and visitors who have appreciated rides to their destinations. Please keep reminding patients about this service. Within the month, there will be clear signage in the carparks and throughout the Hospital, providing people with information about where the buggies stop and how to 'catch a ride.'

Clinic	Category	Waiting Time
Audiology	Children 9-32 mths	2 months
	Under 17 years	2-3 months
	Children's hearing aids	4 weeks
	Adult diagnostic tests	4 months
	Adult hearing aids	6 months
	Central auditory processing test	12 months
Breast Care	Urgent	3 weeks
	Semi-urgent *BCC Imaging	10-12 months 2 weeks
Cardiac Surgery	Urgent	1-3 weeks
	Semi-urgent	3-6 weeks
Cardiology	Urgent	1-2 months
	Semi-urgent	2-9 months
	Routine	9-12 months
Colposcopy	Invasive	Within 7 days
	High grade	4 weeks
	Low grade	26 weeks +
	Non cervical	26 weeks +
Dental	Urgent	24 hours
	Semi-urgent	3 weeks
	Routine	2 months
Dermatology (1) Fax urgent referrals to 07 839 8670	Urgent	24 hours
	Semi-urgent Routine	6 weeks 6 months
Paediatric Dermatology		7 months
Hands		2 months
Dermatology Lesion Clinic	Urgent	24 hours
	Routine	6 months
Diabetes Consultant (2)	Urgent	3-4 months
	Semi-urgent	5-6 months
	Routine	6 months +
Diabetes Nurse Educator	Urgent	Within 7 days
	Semi-urgent	Within 6 weeks
Endocrinology	Urgent	1-2 months
	Semi-urgent	2-6 months
	Routine	9-12 months
Endoscopy/Colonoscopy	Medical	4-6 weeks
	Surgical	4-6 weeks 4-6 weeks 24 months
ENT	Urgent	1-3 weeks
	Semi-urgent (children)	Up to 6 months
	Semi-urgent (adults)	Up to 8 months
Gastro-enterology	Urgent	2-4 weeks
	Semi-urgent	2-6 weeks
General Medicine	Urgent	1-2 weeks
	Semi-urgent	2-4 weeks
	Routine	2-3 months
General Surgery	Urgent	1-4 weeks
	Semi urgent	3-5 months
	Routine	11-12 months
Gynaecology	Urgent	2 weeks
	Semi-urgent	3 months
	Routine	6-7 months
Haematology	Urgent	2-8 weeks
	Semi-urgent	6-4 weeks
	Routine	4-10 months
	DVT	4 months
Maxillo-facial	Urgent	Within 24 hours
	Semi-urgent	Within 3 weeks
	Routine	3 months
Neurology	Urgent	1-3 months
	Semi-urgent	3-10 months
	EMG urgent	1-4 months
	Routine	4-6 months
	EEG urgent	2-8 weeks
	routine	2-6 months

Clinic	Category	Waiting Time
Oncology (medical and radiation)	Priority 1	1-2 days
	Priority 2	5-10 working days 10-15 working days
	Priority 3	
Medical	Priority 1	1-2 days 5-10 working days 20-25 working days
	Priority 2	
	Priority 3	
Radiation	Urgent	1 month
	Urgent laser	1-3 weeks
	Semi-urgent – Children	6 months
	Semi-urgent – Adults	11 months
Ophthalmology	Semi-urgent (diabetic)	1 month
	Minor Operation Clinic	12 months
Orthopaedic	General	Under 6 months
	Back pain	Up to 8 months
	Paediatrics	Up to 7 months
	Paediatric Gait Clinic	1-4 weeks
Paediatric Medicine	Urgent	2-3 weeks
	Semi-urgent	2 months
	Routine	2-3 months
Paediatric Surgical	Urgent	1 week
	Semi-urgent	Within 2 weeks
	Routine	3 weeks
Pain clinic	Urgent	Up to 3 months
	Semi-urgent	Up to 5 months
	Routine	6 months
Physiotherapy	General musculoskeletal	5 days (urgent) 6-8 weeks (routine) 2-3 weeks
	Respiratory	4 weeks
	Rheumatology	2 days (urgent)
	Women's Health	2-3 weeks (routine)
Plastics (1) Fax immediate/acute referrals to 07 839 8670	Urgent	2 weeks
	Semi-urgent	4 months
	Routine	6 months +
Plastics Lesion clinic	Urgent	2 weeks
	Semi-urgent	3 months
	Routine	6 months +
Rehabilitation	Day Clinic	1-3 weeks
Renal	Urgent	1-4 weeks
	Semi-urgent	2-4 months
	Routine	4-6 months
Respiratory	Urgent	1-4 weeks
	Semi-urgent	1-2 months
	Routine	4-6 months
Rheumatology (3)	Urgent	1-4 weeks
	Semi-urgent	1-2 months
	Routine	2-4 months
Thyroid	Urgent	2-4 weeks
	Semi-Urgent	4 months
	Routine	4-6 months
Ultrasound	Urgent	2 weeks
	Semi-urgent	7-8 months
	Routine	12-15 months
Urology		Within 2 months
Vascular	Urgent	1-4 weeks
Vascular Surgery	Urgent	1-4 weeks
	Semi-urgent	2-4 months
	Routine	4-6 months

- Adult Mental Health Waiting Times**
- |                              |                    |                 |
|------------------------------|--------------------|-----------------|
| Community mental health team | Crisis referrals   | Within 24 hours |
|                              | Non-crisis/routine | Within 10 days  |
- 1 Immediate & urgent dermatology/plastics cases must be discussed with the specialist or registrar to allow appropriate prioritisation.
  - 2 All urgent diabetes referrals can be seen on the same day.
  - 3 All urgent rheumatology cases should be discussed with the rheumatologist.
  - 4 Carotid studies are now being done by the vascular laboratory.
  - 5 OPHTHALMOLOGY – PLEASE NOTE FAXED REFERRALS ARE NOT ACCEPTED UNLESS THE PATIENT IS ACUTE AND YOU HAVE DISCUSSED THE CASE WITH THE REGISTRAR. ON YOUR ACUTE FAX REFERRAL PLEASE ADVISE THE NAME OF THE DOCTOR WITH WHOM YOU DISCUSSED THE CASE.