

## 1. IMAGE IT!

(IMproving Access and Grading Evaluations using In-depth Teledermatology)

Imagine being able to improve access to dermatology clinics, get feedback on your patient's skin condition within a few days and access a dermatological service for your patients even in remote geographical regions. That is what this trial hopes to achieve in the long term.

IMAGE IT is a feasibility study which aims to determine whether dermatologists can accurately diagnose suspicious moles or skin lesions with digital pictures taken with the technology used by MoleMap New Zealand. Waikato is the only centre involved at this stage.

Potential trial patients will be selected from routine referrals and those who consent will first have a "teledermatology consultation" prior to the face to face consultation.

At the teledermatology consultation, a trained nurse will take a standardised history and digital images of the skin lesion(s) of concern. The patient will then be seen face to face by two dermatologists. If further treatment is required, this will be arranged in the usual way.

No aspect of the patient's management will be altered in any way. This trial aims to see if the teledermatology consultation is as accurate in management as the face to face consultation. At this stage no specific general practitioner input is required.

However, if this trial is successful, the plan is to extend it to a large multi-centre phase III randomised control trial in which there would be input from GPs. It is hoped that this form of "teledermatology" may, one day, reduce patient travel costs, waiting time and increase access to specialist care.

So watch the space. Outcomes will be published in Outreach - your patient may already be involved in the study!

## 2. Orthotic Centre Referrals

You may have noticed a longer wait for appointments at the Orthotic Centre over the last few months. This is the result of increased GP referrals with a resulting increase in demand for orthoses. To be publicly funded orthoses need to be approved by a specialist orthopaedic surgeon. To meet this increased demand the Orthotic Centre has increased the number of orthopaedic specialist clinics from March 2008. Priority for appointments in these clinics will be given to adults with urgent needs and children. Any

remaining appointments will be given to referrals that do not fall into this urgent category.

The Orthotic Centre, Midlands is confident that this enhanced service will enable referrals to be managed in a timely way to accommodate all clients and keep waiting times to a minimum.

Margaret Humble, practice coordinator, Orthotic Centre, Midlands

([MargarethH@orthotics.co.nz](mailto:MargarethH@orthotics.co.nz) 07 843 1281) is happy to be contacted if you have any further questions.

## 3. Best Route for Urgent Referrals

Thank you for sending all outpatient referrals to the Referral Coordination Centre (RCC). The only exceptions are mental health, community health and urology which still go direct to the service. The best route for referrals is to fax to the RCC on 07 839 8817 (except for those practices involved in the electronic referral pilot). This saves two days - or sometimes more - on ordinary post. If you have a patient who you think needs to be seen urgently in the outpatient clinic consider phoning the on-call consultant/registrar to minimise any delay.

## 4. Seeking missing lab and rad results?

This idea came from a GP and it suggests a better way of contacting Waikato Hospital for laboratory or radiology results that are missing from the patient's file.

The suggestion is to use email, which is less intrusive for both GP and the secondary provider. The request would not be sent by a secure route, so would need to identify the patient by NHI number only.

However the requested result would be sent from Waikato Hospital by HL7, in the same way GPs receive other results, so would be secure.

The email addresses to use are:

Radiology\_@waikatodhb.govt.nz

Laboratory\_@waikatodhb.govt.nz

## 5. Welcome to....

**Jules Schofield**, emergency medicine, is a UK graduate who has spent the past eight years doing emergency medicine training in New Zealand - three of which have been at Health Waikato. She is delighted to gain a consultant position here. Her special interests include toxicology and teaching and she is currently doing a diploma in clinical education through the University of Auckland. Although she will shortly be starting maternity leave, she anticipates this will be for a brief period only before getting back into the fray!

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	3 months
	Adult hearing aids	3 months
	Central auditory processing test	6 months
Breast Care	Urgent	3 weeks
	Semi-urgent	3 month
	*BCC Imaging Urgent only	2 weeks
Cardiac Surgery	Urgent	1-3 weeks
	Semi-urgent	3-6 weeks
Cardiology	Urgent	1-2 months
	Semi-urgent	2-6 months
	Routine	6 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	3 months
Dermatology (1) Fax urgent referrals to 07 839 8670	Urgent	5 days
	Semi-urgent	3 months
	Routine	6 months
Paediatric Dermatology		5 months
Dermatology Lesion Clinic	Urgent	7 days
	Semi-urgent	4 weeks
	Routine	6 months
Diabetes Consultant (2)	Urgent	Within 2 weeks
	Semi-urgent	Within 1 month
	Routine	Within 6 months
Diabetes Nurse Educator	Urgent	Within 7 days
	Semi-urgent	Within 6 weeks
Endocrinology	Urgent	6 weeks
	Semi-urgent	5 months
	Routine	Within 6 months
Endoscopy/Colonoscopy Medical	Urgent	4-6 weeks
	Semi-Urgent	4-6 weeks
Surgical	Urgent	4-6 weeks
	Semi-urgent	12-18 months
ENT	Urgent	1-6 weeks
	Semi-urgent (children)	6 months
	Semi-urgent (adults)	6 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	2-6 months
Gynaecology	Urgent	2 weeks
	Semi-urgent	3 months
	Routine	6 months
Haematology	Urgent	2-8 weeks
	Semi-urgent	6-4 weeks
	Routine	4-6 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 routine	2-8 weeks
		2-6 months
Neurosurgery	Urgent	Within 1 month
	Semi-urgent	Within 6 months
	Routine	
Oncology and Medical	Priority 1	1-2 days
	Priority 2	5-10 working days
	Priority 3	40-50 working days
	Priority 1	1-2 days
Radiation	Priority 2	5-10 working days
	Priority 3	25-30 working days

Clinic	Category	Waiting Time
Ophthalmology	Urgent	within 1 month
	Urgent laser	1-3 weeks
	Semi-urgent – Children	within 6 months
	Semi-urgent – Adults	6 months
	Semi-urgent (diabetic)	1 month
	Minor Operation Clinic	within 6 months
Orthopaedic	General – Urgent	1-8 weeks
	Semi-urgent	Up to 3 months
	Routine	Up to 6 months
	Paediatrics – Urgent	1-6 weeks
	Semi-urgent	Up to 4 months
	Routine	Up to 6 months
	Paediatric Gait Clinic	NB: referrals may be initially seen by a Generalist Orthopaedic Surgeon
	CDH/DDH Assess	Within 3 months
		1-6 weeks
Paediatric Medicine	Urgent	1-2 months
	Semi-urgent	3 months
	Routine	3-6 months
Paediatric Surgical	Urgent	2-4 weeks
	Semi-urgent	4-6 weeks
	Routine	8-12 weeks
Pain clinic	Urgent	Up to 1 month
	Semi-urgent	Up to 3 months
	Routine	6 months
Physiotherapy	General musculoskeletal	5 days (urgent) 6-8 weeks (routine)
	Respiratory	5 days (urgent) 4 weeks (semiurgent)
	Rheumatology	4 weeks
	Women's Health	5 days (urgent)
	Continance	3-4 weeks (routine) 6 months
Plastics (1) Fax immediate / acute referrals to 07 839 8670	Urgent	2 weeks
	Semi-urgent	3 months
	Routine	5 months
Plastics Lesion clinic	Urgent	2 weeks
	Semi-urgent	2 months
	Routine	4 months
Rehabilitation	Day Clinic (Physio Only)	1-3 weeks
	Day Clinic (OT)	1-3 weeks
	Rehab Clinic (Physio)	1-3 weeks
	Rehab Clinic (OT)	1-3 weeks
	Rehab Clinic (Neuropsychologist)	
	Urgent	1-3 weeks
Semi-urgent	1-6 months	
	Routine	2 years
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	5 weeks
	Semi-urgent	5 months
	Routine	4-6 months
Ultrasound	Very Urgent	1 week
	Urgent	2 weeks
	Priority	4 weeks
	Routine	3 months
	Non-urgent	6 months
Urology		Within 2 months
Vascular	Urgent	1-4 weeks
	Semi-urgent	2-4 months
	Routine	4-6 months
Vascular Surgery	Urgent	1-4 weeks
	Semi-urgent	2-4 months
	Routine	4-6 months
<b>Adult Mental Health Waiting Times</b>		
Triage (face to face or phone triage)	Crisis referrals Non-crisis/routine	Within 24 hours Within 2 weeks

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.

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