

1. Nurse Roles

We thought it would be useful to introduce the nurse educators, co-ordinators and practitioners with whom GPs interact from time to time.

Mark Smith is a mental health Nurse Practitioner whose role is an early intervention one with Health Waikato. Identifying clients while they are still in the inpatient unit and then working with them prior to their discharge into the community, he then continues working with them in the community. Mark interfaces with primary providers including GP's through the way he then assists clients to move on from mental health services. He is optimistic about adding prescribing rights to his range of therapeutic options later in the year. He is available for consultation about mental health issues. He can be contacted at: smithma@waikatodhb.govt.nz

Patricia Swann is the Lung Cancer Clinical Nurse Specialist and her role is fundamental to the provision of quality service for people with lung cancer. Patricia develops close, professional, caring relationships with the lung cancer patients and will continue to be pivotal in ensuring services are tailored to meeting individual patients needs and preferences. Patricia is very happy to be contacted if you have a patient who needs support.

Patricia can be contacted on extension 4856, at Waikato hospital or via page through the hospital switchboard.

Sue King is the nurse specialist for adult inpatient pain management at Waikato Hospital, whose role primarily involves the provision of specialist advice and management for complex pain problems. On occasions, patients are discharged on pain management that will require input by the patient's GP, and Sue liaises with GPs either by phone or letter when these situations arise. For patients on opioids, Sue often negotiates a pain management plan to taper the drug, and a copy of this is provided to the patient's GP.

Sue can be contacted on extension 5810, at Waikato hospital or via page through the hospital switchboard.

Deborah Harris is a neonatal nurse practitioner, working in the newborn intensive care unit. The Neonatal Nurse Practitioner is an expert nurse who works within the Intensive Care Unit and the community settings in the speciality area of Neonatology. She practises both independently and in collaboration with other health care professionals to promote health, prevent disease and to diagnose, assess and manage health needs of babies and their families. Deborah is able to provide a wide range of assessment and treatment interventions, including differential diagnoses, ordering, conducting and interpreting diagnostic and laboratory tests and administering therapies for the management of potential or actual health needs. She can be contacted at: harrisde@waikatodhb.govt.nz

Julie Betts is a Nurse Practitioner™ wound care

The focus her role is the management of patients with chronic or complex wounds, in both delivering direct patient care and service development to support best practice and patient outcomes. Particular areas of interest include management of leg and foot ulcers and the use of manuka honey in wound care.

Julie has established a leg ulcer clinic at Thames hospital and is in the process of establishing other wound clinics at Waikato hospital. These clinics are designed to manage patients with complex wounds not responding to standard treatment in the community or to facilitate earlier discharge of patients from hospital. Julie is available to discuss queries regarding wound care on 021 370 710.

Catherine Callagher Heart failure co-ordinator ensures: All patients admitted with heart failure under Cardiology are supplied with a pack including a Booklet on heart failure, a weigh dairy, low salt diet information, and a bright poster to act as a reminder about: Daily **weigh** noting **2kg variation up or down**, is the time to call GP or Practice nurse. **Maintaining low salt diet. No stopping medications** unless Doctor has said to. Catherine is also involved in helping to manage the patients who readmit within 3 months.

The Stomal Therapy Nurse at Waikato Hospital is **Judy Warren**, 021475876 or ext. 6801. Judy is able to assist with problems/queries related to stomas, preoperatively and postoperatively, inpatient and community, WDHB wide.

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	10-12 months
	*BCC Imaging	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	6 weeks
	Routine	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
	Urgent	4-6 weeks
	Semi-urgent	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 routine	2-8 weeks
		2-6 months

Clinic	Category	Waiting Time
Oncology (medical and radiation)	Priority 1	1-2 days
	Priority 2	5-10 working days 15-20 working days
	Priority 3	
Medical	Priority 1	1-2 days 5-10 working days 30-35 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
	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.