

REFERRAL GUIDELINES

BREAST SURGERY CLINIC

Clinic Lead: Mr Tristan Leech

Referrals: Referral addressed to named head of unit is preferred. The GP Referral Template located within the Mastercare Referralnet system is the preferred referral tool.

For faxed referrals, use the Clinic referral form to fax 9788 1879

Clinic Overview:

Assessment and diagnostic clinic for breast symptoms or signs.

Categories for Appointment

	Clinical Description	Timeframe for Appt
Category 1 Urgent	New diagnosis or suspicion of breast cancer. Please feel free to contact Mr Tristan Leech, Breast Surgeon, or Gen Surgery 3 Unit Registrar via switchboard on 9784 7777 to discuss urgent cases	1 – 2 weeks
Category 2 Routine	Imaging/clinical findings suggestive of benign disease, but specialist review desired	1-3 Months
Emergency		Immediately via Emergency Department

Eligibility Criteria

- Symptomatic breast disease of all types including new lump, distortion, nipple discharge, skin changes, infections, pain
- Known familial breast cancer syndrome
- Patients referred from BreastScreen with diagnosis of malignancy

IMPORTANT:

The following referral information is mandatory:

Referral:

- Date of referral
- Speciality
- Referring practitioner name
- Provider Number
- Referrer's signature

Patient Demographic:

- Full name
- Date of birth
- Postal address
- Contact numbers
- Medicare Number

Clinical:

- Reason for referral
- Duration of symptoms
- Management to date
- Past medical history
- Current medications
- Allergies
- Diagnostics as per referral guidelines

Preferred:

- Addressed to named practitioner
- Duration of referral (if different to standard referral validity)
- Next of kin

X-ray results/reports must be within the last 6 mths

CLINIC LEAD

Mr Tristan Leech

PROGRAM DIRECTOR

Mr Peter Evans

OUTPATIENT ENQUIRIES

P: (03) 9784 2600

F: (03) 9788 1879

Review: October 2019

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Exclusions

- Asymptomatic patients for screening – refer to BreastScreen Victoria
- Cosmetic/reconstructive surgery – refer to plastic and reconstructive surgeons rooms

Alternative referral options

- Patients may still be referred to breast surgeons' private rooms for treatment in public hospital

Minimum Referral Information Required

Please note, referral cannot be processed if minimum information is missing)

- Please address breast surgery referrals to: **Mr Tristan Leech, Breast/Endocrine and General Surgeon, Frankston Hospital**
- Referring practitioner name, provider number and signature
- Date of referral
- Period for which referral is valid (if different to standard referral validity) – indefinite referrals preferred
- Patient's name, address, date of birth, Medicare number and phone number
- Clinical details and reason for referral
- Relevant medical history and medications
- Allergies
- All relevant pathology and radiology results
- **Patients must bring hard film copies of all breast imaging**

Clinic information

- Tuesdays 0900 - 1200
- Outpatient Department, Frankston Hospital – Integrated Health Centre
- **Fax: 9788 1879**
- **Phone: 9784 2600**

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