

Freedom of Information Request ref 047-2223
Secondary Care Referrals

UHNM

1. On behalf of which Trust are you responding?

Part 1 – Internal Referral Pathways and screening tools

2. Does your trust have an internal referral pathway to rheumatology from:

a) Dermatology

Yes

No

Not sure / don't know

b) Gastroenterology

Yes

No

Not sure / don't know

c) Ophthalmology

Yes

No

Not sure / don't know

3. Please give details of any standard internal pathways in place. Please attach any documents to support this.

- No internal pathway- referred in to monitor sight only (Ophthalmology)
- When patient is seen in clinic the Consultant will write a referral letter to the department (Dermatology)
- Consultant would send an adhoc letter to Rheumatology team to refer patients. Ordercom request on Careflow for inpatient referrals

4. What referral protocols are in place? e.g. are patients referred back to the GP with consideration / instruction to refer onward for rheumatology opinion.

- Patients are monitored once been on treatment 5+ years already known to rheumatology and stay on their pathway (Ophthalmology)
- Patients are not referred back to GP. Consultant will write letter directly to the department referring the patient.
- Consultant will write letter directly to the department referring the patient

5. Does your trust utilise any screening tools such as Dublin Uveitis Evaluation Tool (DUET) or Psoriasis Epidemiology Screening Tool (PEST):

Yes

No

Not sure / don't know (Both Ophthalmology and Dermatology)

6. Please give details of any screening tools in place. Please attach any documents to support this.

N/A

Part 2 – Internal referral volumes

7. Are you able to track internal referral volumes on your systems?

Yes (Ophthalmology and Dermatology)

No

Not sure / don't know

As the Rheumatology service is an MPFT service, we cannot report on referrals to the service. This would be the responsibility of MPFT. We can only report referrals which have been received at UHNM from Rheumatology to Gastro, Ophthalmology. This would apply to all 3 specialties in question, .

How often do you receive referrals for suspected axial SpA in rheumatology from:

a) Dermatology

- Weekly
- Monthly
- Quarterly
- Less often
- Never

- Unable to determine how often referrals for suspected axial SpA in rheumatology are received into Dermatology.

b) Gastroenterology

- Weekly
- Monthly
- Quarterly
- Less often

- Unable to determine how often referrals for suspected axial SpA in rheumatology are received into Gastroenterology.

c) Ophthalmology

- Weekly
- Monthly
- Quarterly
- Less often
- Never