

Referrals & Actions Page

This page of the form allows you to request an appointment and document the need for particular health professionals. This page also allows referrals to day rehab and referrals to a variety of Rehab2Kids groups.

Selecting an **Appointment** option on this form will send a request through to Scheduling Request List for an appointment to be booked at the medical clinic for that service.

Note for booking a follow up, the form must be signed before the patient speaks to Admin staff to get their appointment, otherwise the Request will not be there for Admin to book.

Referrals and Actions

MRN: 20000021	TEST, Kylie	Sex: F	Age: 5 Years	DOB: 03/09/2013	Interpreter: MC: 25698973171
Home Ph: 0299999999			Mobile:	Language: English	LOC: REHAB2KIDS SCH, ;
Address: Shop 2 2 Albert St RANDWICK NSW 2031					

Rehab2Kids Internal Referrals

Medical Clinics	Earliest Date	Preferred Consultant	Priority
Brain Injury <input type="radio"/> New Appointment <input type="radio"/> F/U Appointment <input type="radio"/> Telehealth Appointment	no free spaces		
Cerebral Palsy <input type="radio"/> New Appointment <input type="radio"/> F/U Appointment <input type="radio"/> Telehealth Appointment	no free spaces		
Movement Disorders <input type="radio"/> New Appointment <input type="radio"/> F/U Appointment	no free spaces		
Botox <input type="radio"/> Injecting New <input type="radio"/> F/U Face to Face <input type="radio"/> Telehealth Appointment <input type="radio"/> Injecting F/U <input type="radio"/> F/U Phone	no free spaces		
Rehab Ortho <input type="radio"/> New Appointment <input type="radio"/> F/U Appointment	no free spaces		
Limb Clinic <input type="radio"/> New Appointment <input type="radio"/> F/U Appointment <input type="radio"/> Telehealth Appointment	no free spaces		

Instructions for booking staff: ! Please keep these as instructions short as possible so they display correctly in Scheduling

Referrals to **Allied Health** need to be made via usual channels. The requests do not automatically go to scheduling.

Selecting what allied health to attend the next clinic appointment is for documentation purposes and future reference.

Nursing & Allied Clinics

Staff to attend next appointment	<input type="checkbox"/> Physiotherapy <input type="checkbox"/> Social Work <input type="checkbox"/> Dietitian <input type="checkbox"/> Orthotist <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Neuropsychology <input type="checkbox"/> Case Manager <input type="checkbox"/> Prosthetist <input type="checkbox"/> Speech Pathology <input type="checkbox"/> Psychology <input type="checkbox"/> CNC <input type="checkbox"/> Other:
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Referrals to **Day Rehab** can be made by selecting the triage list. Please ensure you document reason for referral, goals and the disciplines required.

Day Rehab

Step Up	<input type="radio"/> Triage List	Reason for Referral	<input style="width: 100%;" type="text"/>
Step Down	<input type="radio"/> Triage List	Goals	<input style="width: 100%;" type="text"/>
Day Rehab Disciplines Required	<input type="checkbox"/> Physiotherapy <input type="checkbox"/> Social Work <input type="checkbox"/> Dietitian <input type="checkbox"/> Orthotist <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Neuropsychology <input type="checkbox"/> Case Manager <input type="checkbox"/> Prosthetist <input type="checkbox"/> Speech Pathology <input type="checkbox"/> Psychology <input type="checkbox"/> CNC <input type="checkbox"/> Other:		

Referrals to specific groups/days can be done by selecting that icon. There are staff allocated to monitoring these lists/referrals.

Groups		
Recreation Officer	<input type="radio"/>	Triage List
School Starters Group	<input type="radio"/>	Triage List
Sibling Group	<input type="radio"/>	Triage List
Amp Camp	<input type="radio"/>	Triage List
Gym Group	<input type="radio"/>	Triage List
High School Transition	<input type="radio"/>	Triage List
Teacher Education Day	<input type="radio"/>	Triage List
Camp Go Ahead	<input type="radio"/>	Triage List
Hip Surveillance	<input type="radio"/>	Triage List
Parent Education Day	<input type="radio"/>	Triage List

Signing off your Form



When you have completed all the required fields, click on the tick in the top left corner to sign the form-you will be prompted to enter your password. This sends the appropriate messages to other Task Lists or Scheduling Request Lists as requested.

If you have left any mandatory fields blank, the system will prompt you. Please be aware that the pop up box does not clearly tell you which field you have left blank. The screen will re-load to one of the incomplete mandatory fields. Incomplete mandatory fields will have a yellow background. There will also be a red star next to the page name if there is a mandatory field that is incomplete.