Specialty Consult Referral Guidelines (HP)

updated 7/2019

All referrals must be non-emergency, outpatient & elective.
Donated services depend on availability of volunteer doctors.

IMPORTANT: Should the results of the SPIRIT donated consult and, if scheduled, donated outpatient surgery/procedure indicate that additional clinical follow-up is appropriate, it is the patient's responsibility to schedule and arrange payment for these services should they decide to pursue such follow-up care. SPIRIT does not arrange for or provide coverage for follow-up care. Referring clinic maintains responsibility for care after procedure and final appointment.

REFERRAL TYPE	CRITERIA FOR ELIGIBILITY
ENDOCRINOLOGY	**SCHC on-site consult. (SPIRIT volunteer; Dr. Adams)**
ENT	
Surgery Consult ONLY	*Limited appointment availability; wait may be 6-12 months.* Nodule referral must include radiology and benign biopsy results. Hearing loss referral must include hearing test (audiogram) results.
GASTROENTEROLOGY	
Consult	**SCHC on-site consult only. (SPIRIT volunteers; Drs. Meyer, Lawson, Pauly)**
Diagnostic Colonoscopy	Diagnostic only; NO routine screenings. *Limited appointment availability; wait may be 6-12 months.* *Requires SPIRIT Referral Form (PAGE 2) signed by patient.*
EGD	At least <u>one</u> of the following: −bleeding −dysphagia −patients with GERD −continued upper abdominal pain despite negative stool test for H. pylori
GENERAL SURGERY	
Cholecystectomy	Must include radiology confirming cholelithiasis.
Hernia	Radiology NOT required; provide if available.
Breast Cyst	Must include radiology & benign biopsy results.
Hemorrhoidectomy	Surgical referrals should be reserved for cases in which symptoms are severe and persist despite attempted preventative measures.
Lipoma, Cyst	Must be symptomatic if <2cm; identify the size and location; radiology (if available).
GYNECOLOGY	
Surgery Consult ONLY	Provide all relevant imaging for referring diagnosis. No hysterectomy referrals.
HEPATOLOGY (liver disease)	**SCHC on-site consult. (SPIRIT volunteers; Dr. Pauly)**
OPHTHALMOLOGY	
Cataract	Include vision test or optometrist notes if present in chart; some surgeons require 20/80 vision or worse to be eligible for donated surgery.
Pterygium	Appropriate if ANY of the following are true: - continued debilitating irritation/redness despite regular use of precautionary measures and artificial tears - grown so large that it is starting to block the pupil (not just the cornea) - optometrist confirms that it has caused a vision change
Retinal	Appropriate if ANY of the following is true: - retina damage diagnosed in emergency room; include all relevant documentation - ophthalmologist has recommended retinal surgery evaluation
Diabetic Retinopathy	NOT accepting referrals for screening or treatment.
Glaucoma	NOT accepting referrals for screening or treatment.
ORTHOPEDIC	
Eligible Cases	Hand, shoulder, knee cases that are likely outpatient; include all available and relevant radiology; referring PCP must guarantee post-operative physical therapy.
Ineligible Cases	Urgent fractures; hip cases; partial or full knee replacement; knee arthroscopy for patients with severe arthritis; physical therapy.
NEUROLOGY	**SCHC on-site consult. (SPIRIT volunteers; Dr. Axelrod)**
PULMONOLOGY	
Consult	Consult, pulmonary function test. Pulmonologist will determine need for PFT.
RHEUMATOLOGY	**SCHC on-site consult. (SPIRIT volunteers; Dr. Scalapino)**
UROLOGY	
Consult	**SCHC on-site consult. (SPIRIT volunteers; Dr. Chiu)**
Surgery Consult ONLY	Kidney stone and hydronephrosis referrals must include recent imaging, phimosis, TURP. Stent removal referrals reviewed case by case; acceptance depends on why stent was put in.
UROGYNECOLOGY	
Surgery Consult ONLY	Requires gynecologist referral.

All referrals must be non-emergency, outpatient & elective.
Donated services depend on availability of volunteer doctors.

VISION (OPTOMETRY)	
Vision Exam, Free Glasses	Exam for worsening or changing vision only; no routine screenings. **VISUAL ACUITY TEST REQUIRED BEFORE SENDING REFERRAL** • Attached eye chart is 20/30 equivalent when testing at 10 feet. • If patient has glasses for distance, use when doing visual acuity test. ➔ If patient has symptoms ONLY of trouble seeing up close (reading) AND can pass visual acuity test (read 4/5 of the letters at 10 feet with either eye), recommend OTC readers as follows: Age — Start With 40-45 — +150 46-50 — +200 51+ — +250
ELIGIBLE	If recommended OTC readers do not improve vision, patient <u>can</u> be referred. Chart note must document: (1) visual acuity test results, <u>and</u> (2) OTC readers did not improve vision ➔ If patient diabetic, include A1C level.
ELIGIBLE	If patient does not pass visual acuity test (can't read 4/5 letters at 10 feet with either eye). ➔ If patient diabetic, include A1C level.
ELIGIBLE	Current distance glasses are damaged. ➔ If patient diabetic, include A1C level.
INELIGIBLE	If patient passes visual acuity test (can read 4/5 letters at 10 feet with either eye) AND no trouble seeing up close (reading) AND current distance glasses NOT damaged.
INELIGIBLE	If patient passes visual acuity test, but has trouble seeing up close (reading): • Patient must try OTC readers first. *EXCEPTION*: *Patient uses glasses for distance but has trouble seeing up close IS eligible.*