

Criteria for Orthopaedic Referrals

This service is severely under pressure with more referrals that can be managed within the current manpower, clinic access and theatre access.

GPs to use the following criteria to evaluate and prioritise patients for referral to Hutt Hospital.

Priority	Timeframe	Criteria	Examples
Immediate	1 week	<ul style="list-style-type: none"> Strong evidence of malignancy Disc prolapse with significant neurological deficit including possible Cauda Equina 	<p>The following do require immediate intervention</p> <ul style="list-style-type: none"> Fractures (with the exception of minor finger or toe fractures) acute bone or joint infection
Urgent	2- 4 Weeks	<ul style="list-style-type: none"> Severe functional impairment, significant pain, poor analgesic control Delay would mean significant risk of permanent disability 	<ul style="list-style-type: none"> Hip osteoarthritis with avascular necrosis Tendon rupture e.g. Achilles, distal biceps (not rotator cuff) Possible DDH Prosthetic infection
Semi Urgent A	1 – 4 months	<ul style="list-style-type: none"> Moderate functional impairment Severe pain not helped by conservative management 	<ul style="list-style-type: none"> Significant OA hip or knee with BMI 45 or less except in exceptional circumstances Osteoarthritis of major joint with significant pain and restriction Severe sciatica Severe carpal tunnel syndrome Significant cuff tear with functional loss and pain

The following should not be referred to Hutt Hospital (referrals will be returned to GP care)

Description	Examples
<ul style="list-style-type: none"> Back or neck pain without red flags or significant radicular pain or neurological signs 	<ul style="list-style-type: none"> Ganglia Cosmetic lesions Mild to moderate carpal tunnel syndrome Hallux valgus without severe deformity and skill problems Minor orthopaedic problems Patient covered with ACC that can be managed in private

In order to enable us to triage accurately and fairly, referrals should:

- Be structured in a cohesive way, giving a history of the problem as well as a history of comorbidities and BMI
- Include examination findings, results of investigations and a record to treatment to date

Referral with inadequate information will be returned to GP care.