

Wigan Primary Care Respiratory Service Referral Form

Diagnostics and Disease Management



Patient Name: _____

DOB: _____ NHS No: _____

Address: _____

Postcode: _____

Tel: _____

Email: _____

Wigan PCRS provides a diagnostic & management service for those **AGED 18 YEARS OLD AND ABOVE** in which patients can be referred for assessment in relation to Asthma and/or COPD when they do not have an existing diagnosis or to confirm a diagnosis of these conditions or who are known to have Asthma and/or COPD and require further assessment regards to management and optimisation of treatments for these conditions.

How would you like Wigan PCRS to process to results of assessment and test results if applicable?

PCRS to send Spirometry reports ONLY - GP practice to contact and follow patient up. PCRS will discharge patient.

PCRS to send Spirometry reports AND recommendations - GP practice to follow up patient regards results & recommendations. PCRS will discharge patient.

Consent

Patient consents to referral: _____ Yes No

Electronic sharing of medical records: Yes No

Patient Specific Direction (PSD) template – Spirometry Reversibility Testing

I authorise the named patient on this referral to receive the following short acting bronchodilator and that this can be administered by the Health Care Professional who is suitably qualified to do so and is employed by Primary Care Respiratory Service – BOC Healthcare.

Medication: _____ Salbutamol metered dose inhaler

Dosage: 400 micrograms _____

Frequency: Once only _____

Route: Inhalation with Volumatic or Aerochamber _____

Prescriber _____

Signature: _____

Role: _____ Date: _____

Expiry date of PSD: _____

GP Surgery: _____

Referral criteria

The patient MUST have had the following completed PRIOR to referral and this is to be attached to the referral form otherwise the referral will be rejected as incomplete.

- Most recent FBC, U&Es, BNP (if applicable)
- Most recent Chest X-Ray
- Last 3 consultations including the one which led to the referral being made
- GP Summary (including current medications)
- Copy of ANY Respiratory AND Cardiology Letters AND/OR Reports from consultants or specialist nurses

Incomplete referrals or those with a typed signature on PSD referral forms will be returned to the referrer. Any queries/questions, please ring 0800 012 1858.

Email completed referrals to: boc.clinicalservices@nhs.net