*Referral suggested wording templates*

*This template is from the RACGP resource ‘*[*Referring to medical consultants: A guide for ensuring good referral outcomes for your patients*](https://www.racgp.org.au/running-a-practice/practice-resources/general-practice-guides/referring-to-medical-consultants)*’. Refer to this guide for further information.*

The Bettering the Evaluation and Care of Health (BEACH) program has reported a significant increase in the likelihood that a GP consultation will result in at least one referral. This equated to an estimated 5.1 million more referrals to medical consultants in 2013–14 when compared with 2004–05.

## Types of referrals in general practice

While the needs of each patient differs, there are three types of referrals (Table 1).

Table 1. Types of referrals in general practice

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| **Table 1. Types of referrals in general practice**  |
| **Referral type** | **Suggested phrasing** |
| Referral for a one-off/single consultation orshort-term assessment,investigation andmanagement of apresenting symptomor problem | These referrals should clearly state that you will resume management for subsequent care once the one-off consultation or investigation has occurred.**Example 1:***Dear Dr [insert doctor name]**Mr Black requests a referral for a skin cancer check. He has no previous history of skin cancer and uses sun protection.**I am able to perform his future annual skin cancer checks.***Example 2:***Dear Dr [insert doctor name]**Mrs White, aged 88 years, has a number of comorbidities, which I am happy to manage.**Please find attached a list of problems and prescribed medications. She has developed a parkinsonian gait. I do not think she has Parkinson’s disease but would like your opinion in regard to this.* |
| Referral to a medicalconsultant for routine(annual) review of achronic problem | These referrals should clearly state the period of referral (usually 12 months) to ensure that the GP can provide an update on the patient’s medical conditions, medications and allergies.**Example:***Dear Dr [insert doctor name]**Thank you for seeing Mr Habib for an annual cardiac review.**He has a previous history of non-ST-elevation myocardial infarction in 2009 and coronary stents were inserted at that time.**I will continue to review him three-monthly to monitor his risk factors and manage his medications.* |
| Referral to a medicalconsultant whereshared careis anticipated in thelong term | These referrals should clearly state the period of referral and intention to establish shared care for the patient in the long term. Include a copy of the GP Management Plan (GPMP) if applicable.Example:*Dear Dr [insert doctor name]**Thank you for seeing Ms Rossetti for an opinion and suggested management in regard to her resistant hypertension.**Her blood pressure has consistently stayed in the range of 180–190/95–100. I have performed a range of investigations, including echocardiogram, renal artery doppler and renal function tests, which were all normal. Copies are attached. She developed a cough with angiotensin converting enzyme inhibitors but has tolerated candesartan. Her usual medications are listed below.* |

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