**Tutorials: T**op **T**ipsfor **R**eferrals

**Issue Solent General Paediatric Outpatients**

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| Who’s who in the Solent General Paediatric Outpatient Service? |
| The service is made up of consultant paediatricians, associate specialists, and specialty doctors. Clinics are currently offered in Thornhill Centre for Healthy Living, the Royal South Hampshire Hospital and the Western Community Campus in Millbrook.  All referrals are triaged at **Solent General Paediatric Medical Service,** **Adelaide Health Centre, Western Community Hospital Campus, William Macleod Way, Southampton.**  **SO16 4XE** |

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| What do we do? |
| We see children with a wide range of general paediatric issues, including  **Gastrointestinal** Failure to thrive/growth related problems, Constipation under 2 years, (over 2 years Solent continence clinic), Vomiting, Bowel problems, toddler diarrhoea.  **Neurological** Headaches, Fits/faints/funny turns, Increased/decreased tone.  **Respiratory** Chronic cough, Recurrent chest infections.  **Renal** Urinary tract infections, Haematuria.  **Cardiac** Murmurs, Faints, Palpitations.  **Miscellaneous** Malaise/Lethargy, Pallor, Muscular aches and pain, Back pain, Lymphadenopathy, Skin Marks. |

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| What don’t we do? |
| Emergency or acute referrals – any red flags should be referred urgently to UHS  Complex urology/nephrology referrals  Orthopaedic referrals  Referrals that likely require tertiary opinion, e.g. complex neurology/cardiology  Referrals for which there is identified specialism at UHS, e.g. oncology, diabetes, asthma and allergy, dermatology.  We do not have facilities for x-ray, ultrasound or taking bloods in our clinics, so patients may be asked to attend UHS on another date to complete investigations. If investigations are likely to be needed on the day, or if parents have a preference for completing everything in one go, then it may be preferable to refer to UHS in the first instance.  You do not need to refer to us to access community therapy (OT, physio, SLT), dietetics or portage. Please refer directly to the relevant service. Dyspraxia/developmental coordination disorder should be managed in school initially, using the Schools Therapy Pack, and referred on to Occupational Therapy if required. |
| Which patients should be referred to Solent rather than UHS? |
| Patients should be given the option of where they would prefer to be seen, and Solent can offer local clinics which may suit families with transport difficulties.  Children with neurodevelopmental issues such as autism and learning disability, who are not currently known to the Neurodevelopmental service but develop a new general paediatric issue may prefer to be seen by Solent, as there will be some familiar clinicians, and our doctors may have greater knowledge of local community services available. However, we do not follow up children with autism if there are no current medical concerns.  New referrals for investigation and diagnosis of autism and learning disability should be made directly to Solent Neurodevelopmental Paediatrics. New referrals for possible ADHD should be made directly to CAMHS. |

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| What if I’m not sure? |
| If you are not sure whether we will be able to help with a particular child we are more than happy to discuss referrals over the phone. Please contact our business support team on 0300 123 6661 and they will put you through if possible or arrange for an appropriate clinician to call you back or e-mail you on an nhs.net address if you prefer. Many of our clinicians are part time so your call will not necessarily be returned the same day. |