

# Monash Health Referral Guidelines

## PLASTIC SURGERY

### EXCLUSIONS

Services not offered by Monash Health

Patients under 18 years of age: [Click here](#) for Monash Children's Paediatric Plastic Surgery guidelines

### CONDITIONS

Services offered by Monash Health

#### General

- [Burns and scars](#)
- [Foreign Body removal](#)
- [Lymphoedema](#)
- [Other chronic sores and ulcers](#)
- [Pressure sores](#)
- [Scar revision and scar management](#)
- [Vascular malformations](#)

#### Hand

- [Carpal tunnel & other nerve compression syndromes](#)
- [Congenital deformities](#)
- [Secondary hand surgery after injury](#)
- [Dupuytren's contracture](#)
- [Ganglia](#)
- [Soft tissue tumors of the hand](#)
- [Nerve palsies](#)
- [Open hand fracture](#)
- [Closed hand fracture](#)
- [Acute fingertip injuries](#)
- [Sub-acute fingertip injuries](#)
- [Rheumatoid hand deformities](#)
- [Stenosing tenosynovitis](#)

#### Soft Tissue Tumours

- [Suspected Soft Tissue Tumours \(limb/trunk\)](#)
- [Suspected Soft Tissue Tumours at non limb/trunk sites](#)

#### Lesions

- [Benign skin lesions](#)
- [Malignancies including head, neck, salivary gland, connective tissue](#)
- [Melanoma](#)
- [Other skin cancers](#)
- [Subcutaneous & deep tissue tumours](#)

#### Face

- [Craniofacial abnormalities](#)
- [Faciomaxillary abnormalities](#)

#### Ear

- [Reconstruction \(Congenital & traumatic abnormalities\)](#)

#### Nose

- [Nasal deformity due to trauma](#)
- [Nasal reconstruction](#)
- [Rhinophyma](#)

#### Eyelid

- [Ptosis](#)
- [Ectropion](#)
- [Eyelid reduction in abnormal cases](#)

#### Abdomen

- [Abdominoplasty](#)

MORE CONDITIONS OVER PAGE

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Last updated:

6/12/2018

# Monash Health Referral Guidelines

## PLASTIC SURGERY

### CONDITIONS (continued)

#### Breast

- [Reconstruction following mastectomy](#)
- [Reduction mammoplasty](#)
- [Gynaecomastia](#)
- [Congenital abnormalities](#)
- [Mastopexy](#)
- [Removal of prosthesis](#)

#### Genital

- [Vaginal/Penile reconstruction following malignancy](#)

### PRIORITY

All referrals received are triaged by **Monash Health clinicians** to determine **urgency of referral**.

#### EMERGENCY

For emergency cases please do any of the following:

- send the patient to the Emergency department OR
- Contact the on call registrar OR
- Phone 000 to arrange immediate transfer to ED

#### URGENT

The patient has a condition that has the potential to deteriorate quickly with significant consequences for health and quality of life if not managed promptly.

#### ROUTINE

The patient's condition is unlikely to deteriorate quickly or have significant consequences for the person's health and quality of life if the specialist assessment is delayed beyond one month

### REFERRAL

How to refer to Monash Health

#### Mandatory referral content

##### Demographic:

Full name  
Date of birth  
Next of kin  
Postal address  
Contact number(s)  
Email address  
Medicare number  
Referring GP details  
including **provider number**  
Usual GP (if different)  
Interpreter requirements

##### Clinical:

Reason for referral  
Duration of symptoms  
Management to date and response to treatment  
Past medical history  
Current medications and medication history if relevant  
Functional status  
Psychosocial history  
Dietary status  
Family history  
Diagnostics as per referral guidelines



[Click here](#) to download the outpatient referral form

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**Program Director:**

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**Last updated:**

6/12/2018

# Monash Health Referral Guidelines

## PLASTIC SURGERY

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### CONTACT US

#### **Medical practitioners**

To discuss complex & urgent referrals  
contact on call registrar on 9594 6666

#### **Submit a fax referral**

Fax referral form to Specialist Consulting  
Services: 9594 2273

#### **General enquiries**

Phone: 1300 342 273

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#### **Last updated:**

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## GENERAL

### BURNS AND BURN SCARS

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Emergency

Refer immediately to ED if severe post burn

##### Urgent

Refer to Outpatients urgently

##### Routine

Dependent on severity

[BACK](#)

### FOREIGN BODY REMOVAL

#### Initial GP Work Up

- X-Ray or USS as appropriate

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Urgent

Dependent on severity

[BACK](#)

### LYMPHOEDEMA

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

### OTHER CHRONIC SORES AND ULCERS

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

### PRESSURE SORES

#### Initial GP Work Up

- Contact plastic surgery clinic co-ordinator to discuss assessment of non-ambulant patients

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

## GENERAL (cont'd)

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### SCAR REVISION AND SCAR MANAGEMENT



#### WHEN TO REFER?

##### Initial GP Work Up

- N/A

##### Management Options for GP

- N/A

**Routine**

Dependent on severity

[BACK](#)

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### VASCULAR MALFORMATIONS



#### WHEN TO REFER?

##### Initial GP Work Up

- USS of lesions

##### Management Options for GP

- N/A

**Routine**

Dependent on severity

[BACK](#)

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## HAND

### CARPEL TUNNEL AND OTHER NERVE COMPRESSION SYNDROMES

#### Initial GP Work Up

- Nerve conduction studies

#### Management Options for GP

- N/A

#### WHEN TO REFER?

**Routine**

Dependent on severity

[BACK](#)

### CONGENITAL DEFORMITIES, SECONDARY HAND SURGERY AFTER INJURY

#### Initial GP Work Up

- Hand X-ray

#### Management Options for GP

- N/A

#### WHEN TO REFER?

**Routine**

Dependent on severity

[BACK](#)

### DUPUYTREN'S CONTRACTURE

#### Initial GP Work Up

- Include details of functional impairment

#### Management Options for GP

- N/A

#### WHEN TO REFER?

**Routine**

Dependent on severity

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### GANGLIA, SOFT TISSUE TUMORS OF THE HAND

#### Initial GP Work Up

- Include details of functional impairment

#### Management Options for GP

- N/A

#### WHEN TO REFER?

**Routine**

Dependent on severity

[BACK](#)

### NERVE PALSIES

#### Initial GP Work Up

#### Investigations:

- Nerve conduction studies

#### Management Options for GP

- N/A

#### WHEN TO REFER?

**Routine**

Dependent on severity

[BACK](#)

## HAND (cont'd)

### OPEN FRACTURES, CLOSED HAND FRACTURES, ACUTE FINGERTIP INJURIES

#### Initial GP Work Up

- Hand X-ray

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Emergency

Refer to ED for assessment

##### Urgent

Refer to Outpatients urgently

[BACK](#)

### SUB-ACUTE FINGERTIP INJURIES

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Urgent

Refer to Outpatients urgently

[BACK](#)

### RHEUMATOID HAND DEFORMITIES

#### Initial GP Work Up

- Include details of functional impairment

#### Investigations:

- Hand USS

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

### STENOSING TENOSYNOVITIS

#### Initial GP Work Up

- Include details of functional impairment

#### Investigations:

- Hand USS

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

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## SOFT TISSUE TUMOURS

### SUSPECTED SOFT TISSUE SARCOMAS (LIMB/TRUNK), SUSPECTED SOFT TISSUE SARCOMAS AT NON LIMB/TRUNK SITES



### WHEN TO REFER?

#### Urgent

Refer to Outpatients urgently

#### Initial GP Work Up

- X-Ray

#### Management Options for GP

- N/A

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## LESIONS

### BENIGN SKIN LESIONS

#### Initial GP Work Up

- Biopsy

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

### MALIGNANCIES INCLUDING: HEAD, NECK, ORAL, SALIVARY GLANDS, CONNECTIVE TISSUE

#### Initial GP Work Up

- CT Scan and other imaging as appropriate

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Urgent

Refer to Outpatients urgently

[BACK](#)

### MELANOMA, CONFIRMED OR SUSPECTED

#### Initial GP Work Up

- Do not perform punch biopsy if Melanoma is suspected

#### Investigations:

- Pathology report if available

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Urgent

Refer to Outpatients urgently

[BACK](#)

### OTHER SKIN CANCERS

#### Initial GP Work Up

- Include details of size and size of excision required

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Urgent

Refer for definitive diagnosis

[BACK](#)

### SUBCUTANEOUS AND DEEP TISSUE TUMOURS

#### Initial GP Work Up

- USS of lesion
- CT scan if malignancy suspected

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Urgent

Refer for definitive diagnosis

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## FACE

### CRANIOFACIAL ABNORMALITIES, FACIOMAXILLARY ABNORMALITIES



### WHEN TO REFER?

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### Routine

Refer to Faciomaxillary Clinic

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## EAR

### RECONSTRUCTION FOR TRAUMATIC AND CONGENITAL ABNORMALITIES



### WHEN TO REFER?

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### Routine

If secondary to acute trauma

[BACK](#)

## NOSE

### NASAL DEFORMITY DUE TO TRAUMA

#### Initial GP Work Up

- Imaging as applicable

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Emergency

Refer immediately to ED if post fracture

##### Urgent

- Refer to Outpatients urgently
- See [Aesthetic procedures and indications for surgery in Victorian public health services](#)

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### NASAL RECONSTRUCTION

#### Initial GP Work Up

- Imaging as applicable

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

### RHINOPHYMA

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

## EYELID

### PTOSIS, ECTROPION, EYELID REDUCTION IN ABNORMAL CASES



### WHEN TO REFER?

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### Routine

If causing obstruction of vision otherwise do not refer

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## ABDOMEN

### ABDOMINOPLASTY

### WHEN TO REFER?

#### Initial GP Work Up

- Standard history

#### Investigations:

- BMI
- Smoking status

#### Management Options for GP

- Cessation of smoking
- Weight reduction

#### Routine

- Post morbid obesity treatment where significant clinical symptoms are present (for example intractable intertrigo)
- See [Aesthetic procedures and indications for surgery in Victorian public health services](#)

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## BREAST

### RECONSTRUCTION FOLLOWING MASTECTOMY

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Post mastectomy reconstruction

[BACK](#)

### REDUCTION MAMMOPLASTY

#### Initial GP Work Up

- Body Mass Index
- Smoking status

#### Management Options for GP

- Cessation of smoking
- Weight reduction

#### WHEN TO REFER?

##### Routine

- When there are significant symptoms or recurrent intertrigo
- See [Aesthetic procedures and indications for surgery in Victorian public health services](#)

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### GYNAEOMASTIA, CONGENITAL ABNORMALITIES

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### WHEN TO REFER?

##### Routine

Dependent on severity

[BACK](#)

### MASTOPEXY

#### Initial GP Work Up

- Body Mass Index
- Smoking status

#### Management Options for GP

- Cessation of smoking
- Weight reduction

#### WHEN TO REFER?

##### Routine

- Following significant weight loss eg. After gastric banding or for correction of significant breast reconstruction.
- See [Aesthetic procedures and indications for surgery in Victorian public health services](#)

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### REMOVAL OF PROSTHESIS

#### Initial GP Work Up

- Body Mass Index
- Smoking status

#### Management Options for GP

- Cessation of smoking
- Weight reduction

#### WHEN TO REFER?

##### Routine

- If rupture of silicone prosthesis
- See [Aesthetic procedures and indications for surgery in Victorian public health services](#)

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## GENITAL

### VAGINAL/PENILE RECONSTRUCTION POST MALIGNANCY



### WHEN TO REFER?

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### Routine

Dependent on severity

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