## Referrals/consent pathway – Prioritisation of referrals

Owner:	Michael Mundy/Benjamin Thomas	
Approved by	Therapies Clinical Governance Approval Group	
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Extension approved:		
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## **Key Amendments**

Date	Amendments	Approved by:
25th January 2023	Document extended to 30th June 2023 whilst	Dr J Trevelyan/
	under review.	Benjamin Thomas
23 <sup>rd</sup> May 2023	Document reviewed and separated by	Michael
	speciality (Musculoskeletal/Pelvic	Mundy/Benjamin
	Health/Rheumatology)	Thomas

## **Prioritisation Levels – Rheumatology Physiotherapy**

Tier	Definition	Examples	Action
Priority 1 (Urgent)	Patients to be seen in <1 week	<ul> <li>No patients are required to be seen in this category.</li> </ul>	
Priority 2 ( <i>Urgent</i> )	Patients to be seen in <2 weeks	<ul> <li>Post steroid injection.</li> <li>At Consultant request to manage an acute "flare up" of a patient's existing rheumatological condition.</li> <li>At Consultant request to manage an acutely symptomatic newly diagnosed rheumatological condition.</li> </ul>	Face to face or virtual management based on patient preference and clinical reasoning. Able to offer at all sites
Priority 3 ( <i>Routine</i> )	Patients to be seen in <3 months	<ul> <li>R.A</li> <li>A.S</li> <li>Fibromyalgia</li> <li>Connective tissue disorder</li> <li>Ehlers-Danlos Syndrome.</li> <li>Chronic pain</li> <li>List not exhaustive and clinical reasoning to be used</li> </ul>	Face to face or virtual management based on patient preference and clinical reasoning. Able to offer at all sites

This information should be used in conjunction with the Physiotherapy Pathway WAHT-TP-011. Use the version on the internet to ensure the most up to date information is being used.