

EP4	Referral Procedure and Referral Criteria	IRMER Employers Procedures NHS Dumfries & Galloway
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## Referral Procedure and Referral Criteria

### 1. Objective

To ensure that the Referrer provides sufficient information for the patient and the Referrer to be identified and sufficient clinical information for the exposure to be justified by a Practitioner or authorised by an entitled Operator.

### 2. Referral Procedure

#### 2.1 Electronic referral / request card:

An electronic referral or request card (or suitable alternative e.g. letter) must be completed by the Referrer and be available to the Practitioner and Operator before a procedure can be carried out.

#### 2.2 Information on the Referral to Include: -

Essential	Useful
<ul style="list-style-type: none"> <li>• Patients full name</li> <li>• Date of Birth</li> <li>• Address</li> <li>• CHI Number</li> <li>• Examination requested</li> <li>• Sufficient, and current, clinical information relevant to the medical exposure requested</li> <li>• Indication of pregnancy, LMP and breast feeding as appropriate</li> <li>• Indication of known potential medical complications associated with examination requested e.g. allergy, renal function (for CT contrast)</li> <li>• Name / signature of Referrer</li> <li>• Date of referral</li> <li>• Name of consultant (if appropriate)</li> <li>• Ward / Department / GP surgery</li> <li>• Mode of transport if ward patient</li> <li>• Indication of research trial</li> <li>• Identification of non medical imaging on medical imaging equipment.</li> </ul>	<ul style="list-style-type: none"> <li>• Sex</li> <li>• Patient contact telephone number if available</li> <li>• Address to which to forward report</li> <li>• Contact telephone number for Referrer</li> <li>• OP transport requirements</li> </ul>

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### 2.3 Incomplete/Changes to Clinical Information on Request Cards: -

Any request card/electronic referral found to be incomplete (with the exception of date of referral) or, with regard to written requests, illegible, will be returned to the Referrer and the examination will not be undertaken. Alternatively the Practitioner or suitably entitled Operator authorising to protocol may in consultation with the Referrer amend the referral. Any amendments must then be recorded in the post examination details on RIS pertaining to the examination. In the case of order comms an incomplete form cannot be submitted.

## 3 Referral Criteria

General referral criteria are given in Royal College of Radiologists "Making the best use of a Department of Clinical Radiology" is available for all staff on [www.irefer.org.uk](http://www.irefer.org.uk).

*Dental referral criteria are given in the Faculty of General Dental Practitioners (UK) Good Practice Guidelines entitled "Selection Criteria for Dental Radiography".*

Each department that accepts referrals for procedures utilising radiation that are not identified in the documents above, will establish a Level 3 document which identifies the criteria under which a referral will be accepted.

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