

# Monash Children's Hospital Referral Guidelines

## PAEDIATRIC PLASTIC & RECONSTRUCTIVE SURGERY

### EXCLUSIONS

Services not offered by Monash Children's Hospital

Patients over 18 years of age: Refer to Monash Hospital – [Click here](#) for adult Monash Health Plastic & Reconstructive surgery guidelines

### CONDITIONS

[Cleft lip and palate service](#)

[Craniofacial anomalies; congenital and acquired](#)

[Ear anomalies / differences](#)

[Breast & chest anomalies / differences](#)

[Nasal deformity](#)

[General plastic surgery and reconstruction](#)

[Trauma; craniofacial, hand, general](#)

[Hand surgery; congenital and acquired](#)

### PRIORITY

All referrals received are triaged by **Monash Children's Hospital 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

Acting Head of unit:  
Mr Charles Baillieu

Program Director:  
Mr Alan Saunder

Last updated:  
6/12/2018



# Monash Children's Hospital Referral Guidelines

## PAEDIATRIC PLASTIC & RECONSTRUCTIVE SURGERY

### REFERRAL

How to refer to  
Monash Children's  
Hospital

#### 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

### CONTACT US

#### Medical practitioners

To discuss complex & urgent referrals  
contact: On-call registrar via Monash Health  
Contact Centre: 9594 6666

#### General enquiries

Phone: 8572 3004

#### Submit a referral

Fax referral form to Monash Children's  
Hospital Specialist Consulting Services:  
Fax: 8572 3007  
Email: [scmonashchildrens@monashhealth.org](mailto:scmonashchildrens@monashhealth.org)

Acting Head of unit:  
Mr Charles Baillieu

Program Director:  
Mr Alan Saunder

Last updated:  
6/12/2018



## CLEFT LIP & PALATE SERVICE

### WHEN TO REFER?

#### Initial GP Work Up

- Referral for Cleft clinic including relevant past medical history

#### Management Options for GP

- N/A

#### Routine

All referrals for antenatal review and newborn assessment should be directed to Cleft co-ordinator:

Phone: (03) 8572 3833

Mobile: 0400 822 351

Email: [tania.green@monashhealth.org](mailto:tania.green@monashhealth.org)

[BACK](#)

## CRANIOMAXILLOFACIAL ANOMALIES, CONGENITAL OR ACQUIRED

### WHEN TO REFER?

#### Initial GP Work Up

- Referral for Craniofacial clinic including relevant past medical history

#### Management Options for GP

- N/A

#### Routine

Craniofacial anomalies including craniosynostosis, hemifacial microsomia, vascular malformation, haemangioma, plagiocephaly

[BACK](#)

## EAR ANOMALIES / DIFFERENCES

### WHEN TO REFER?

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### Urgent

- Traumatic ear deformities, split earlobes
- If secondary to acute trauma, must be reviewed within 2 weeks

#### Routine

- Congenital ear deformities, microtia, protruding ears, constricted ears
- Ear tags, ear keloids, split earlobes, traumatic ear deformities (please clarify if acute trauma)

[BACK](#)

## BREAST & CHEST ANOMALIES / DIFFERENCES

### WHEN TO REFER?

#### Initial GP Work Up

- N/A

#### Management Options for GP

- N/A

#### Routine

- Congenital anomalies of breast including Poland syndrome, tuberous breasts, breast reduction, breast asymmetry, supernumerary nipple, aplasia breast / nipple
- Gynaecomastia
- See [Guidelines for Aesthetic Surgery on the Public Hospital Waiting List – July 2012](#)

[BACK](#)

## NASAL DEFORMITY

### WHEN TO REFER?

#### Initial GP Work Up

- Imaging as applicable

#### Management Options for GP

- N/A

#### Emergency

If immediately post trauma refer to Monash Health Emergency Department

#### Urgent

If secondary to acute trauma, must be reviewed between 5 and 10 days post injury (ideally 7 days)

#### Routine

Dependent on severity

[BACK](#)

## GENERAL PLASTIC SURGERY AND RECONSTRUCTION



### WHEN TO REFER?

#### Initial GP Work Up

- Include pathology report and other relevant investigations
- Include Ultrasound as applicable

#### Management Options for GP

- Do NOT perform punch biopsy if melanoma suspected; refer for biopsy / confirmation of diagnosis

#### Emergency

Referrals for acute burn injuries should be directed immediately to Monash Health Emergency Department

#### Urgent

- Melanoma (confirmed or suspected), other skin cancers
- Foreign body removal, chronic sores and ulcers

#### Routine

Scar revision, scar management including post burn, vascular malformations, lymphoedema, chalazion or stye, benign skin lesion, subcutaneous and deep tissue tumours

[BACK](#)

## TRAUMA; CRANIOMAXILLOFACIAL, HAND , GENERAL



### WHEN TO REFER?

#### Initial GP Work Up

- X-ray or Ultrasound as applicable
- Include details of functional impairment in referral

#### Management Options for GP

- N/A

#### Emergency

Referrals for open fractures and acute injuries including burns should be directed immediately to Monash Health Emergency Department

#### Urgent

Closed fractures, subacute injuries

[BACK](#)

## HAND SURGERY; CONGENITAL AND ACQUIRED



## WHEN TO REFER?

### Initial GP Work Up

- Hand X-ray or Ultrasound as applicable
- Include details of functional impairment in referral

### Management Options for GP

- N/A

### Emergency

Referrals for open hand fractures and acute fingertip injuries should be directed immediately to Monash Health Emergency Department

### Urgent

Closed hand fractures, subacute fingertip injuries

### Routine

Congenital hand deformities, stenosing tenosynovitis (eg. trigger release), carpal tunnel and other nerve compression syndromes, nerve palsies, rheumatoid hand deformities, dupuytren's contracture, soft tissue tumours of hand (ganglia)

[BACK](#)