

Monash Children's Hospital

Referral Guidelines

PAEDIATRIC VASCULAR ANOMALIES SERVICE

EXCLUSIONS

Services not offered by Monash Children's Hospital

Patients over 16 years of age: Please refer to relevant adult Service – Eg. Dermatology, ENT, Adult Surgical Unit etc

CONDITIONS

BENIGN VASCULAR TUMOURS

- Infantile haemangioma
- Congenital haemangioma
- Tufted angioma
- Spindle-cell haemangioma
- Epithelioid haemangioma
- Pyogenic granuloma
- Hobnail haemangioma
- Microvenular haemangioma
- Anastomosing haemangioma
- Glomeruloid haemangioma
- Papillary haemangioma
- Intravascular papillary endothelial hyperplasia
- Cutaneous epithelioid angiomatous nodule
- Acquired elastotic haemangioma
- Littoral cell haemangioma of the spleen
- Eccrine angiomatous hamartoma
- Reactive angioendotheliomatosis
- Bacillary angiomatosis

LOCALLY AGGRESSIVE OR BORDERLINE VASCULAR TUMOURS

- Kaposiform haemangioendothelioma
- Retiform haemangioendothelioma
- Papillary intralymphatic angioendothelioma (PILA), Dabska tumour
- Composite haemangioendothelioma
- Pseudomyogenic haemangioendothelioma
- Polymorphous haemangioendothelioma
- Haemangioendothelioma not otherwise specified
- Kaposi Sarcoma

MALIGNANT VASCULAR TUMOURS

- Angiosarcoma
- Epithelioid Haemangioendothelioma

Last updated:
November 2024

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CONDITIONS

VASCULAR MALFORMATIONS

- Capillary malformations (CM)
- Lymphatic malformations (LM)
- Primary lymphoedema
- Venous malformations (VM)
- Arteriovenous malformations (AVM)
- Arteriovenous fistula (AVF)

PROVISIONALLY UNCLASSIFIED VASCULAR ANOMALIES

- Intramuscular haemangioma
- Angiokeratoma
- Sinusoidal haemangioma
- Acral arteriovenous 'tumour'
- Multifocal lymphoendotheliomatosis with thrombocytopenia/cutaneous visceral angiomatosis with thrombocytopenia (MLT/CAT)
- PTEN (type) hamartoma of soft tissue / 'angiomatosis' of soft tissue (PHOST)
- Fibro adipose vascular anomaly (FAVA)

IMAGING

Imaging is not required

Imaging prior to referral/appointment is not required as the team will organise the appropriate imaging through Monash Health after assessment. This will prevent unnecessary scans.

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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 Paed Surg 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. For urgent inquiries outside office hours, please call switch on (03) 9594 6666 and page the on-call paediatric surgical registrar.

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 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
Examination findings
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



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

CONTACT US

Medical practitioners

To discuss complex & urgent referrals contact: On-call Paediatric Surgery Registrar via switch: (03) 9594 6666

General enquiries

Phone: 8572 3004

Submit a referral

Refer via electronic referral using HealthLink. Details available at <https://monashchildrenshospital.org/for-health-professionals/gp-ereferrals/>

