



<p>Team Name: Rehabilitation Services</p> <p>Team Lead: Director - Rehabilitation</p> <p>Approved by: Regional Lead - Community & Continuing Care</p>	<p>Reference Number: CLI.6310.SG.006</p> <p>Program Area: Rehabilitation Services</p> <p>Policy Section: General</p>
<p>Issue Date: October 11, 2017</p> <p>Review Date:</p> <p>Revision Date: September 23, 2022</p>	<p>Subject: Referral Prioritization for Adult Outpatient Physiotherapy</p>

Use of pre-printed documents: Users are to refer to the electronic version of this document located on the Southern Health-Santé Sud Health Provider Site to ensure the most current document is consulted.

STANDARD GUIDELINE SUBJECT:

Referral Prioritization for Adult Outpatient Physiotherapy

PURPOSE:

The physiotherapist will review referral information to determine referral priority status based upon the following guidelines.

IMPORTANT POINTS TO CONSIDER:

Cross referrals will be prioritized based on need.

PROCEDURE:

1. The physiotherapist will document assigned priority status as Priority 1, Priority 2, or Priority 3 on the Rehab Services Outpatient Referral Form (CLI.6310.SG.002.FORM.01).
2. Physiotherapist will indicate time frame for first appointment if appropriate.
3. The physiotherapist will then return the referral to the Rehabilitation Services support staff to complete referral intake process.
4. Priority 3 clients will be informed of approximate wait time and if appropriate, those with chronic disease/pain, will also receive the Get Better Together pamphlet.

Priority

Priority 1 is the highest priority, most urgent, and Priority 3 is the lowest priority.

Based upon referral information, Priority 1 status will be assigned to referrals requiring more urgent assessment/intervention. Priority 1 referrals will be seen for initial appointment before Priority 2 and Priority 3 referrals.

Referral priority status is subject to change based on new information which impacts the urgency of assessment and intervention.

Priority 1 clients, with the following needs, should be seen within two weeks from receipt of referral:

- Recent orthopedic surgery including hand, total knee replacement (TKR), open reduction/internal fixation (ORIF), tendon repairs
- Priority 1 hand referral refer to Referral Prioritization for Outpatient Hand Therapy (Occupational Therapy and Physiotherapy) (CLI.6310.SG.004) for appointment timelines
- Post cast removal
- Joint manipulation
- Acute multiple trauma
- Pre-op joints (BTHC)
- Recent amputation
- Acute vestibular
- Recent discharge from hospital upon recommendation by inpatient therapist
- Recent post-operative total hip replacement (clerk to book appointment at 4 - 6 week post operative)
- Cardiac (Bethesda Regional Health Centre – clerk to book at 3 months post cardiac event)

Priority 2 clients, with the following needs, should be seen within three weeks from receipt of referral:

- Priority 2 hand referrals are seen before other Priority 2 referrals
- Acute sprains or strains
- Chronic Vestibular
- Risk of falls
- Pediatric orthopedic referrals to be reviewed on a case by case basis
- Deconditioning after recent hospital stay
- Acute, subacute or functional decline - neurological concerns
- Pre spinal surgery rehab
- Pre joint replacement surgery rehab (Boundary Trails Health Centre)
- Arthroscopies

Priority 3 referrals will be seen as appointment spaces become available and may wait for extended periods. All referrals are seen in order of date received.

- Priority 3 hand referrals
- Chronic disease/pain

REFERENCES:

[CLI.6310.SG.002.FORM.01](#) Rehabilitation Services Outpatient Referral

[CLI.6310.SG.004](#) Referral Prioritization for Outpatient Hand Therapy (Occupational Therapy & Physiotherapy)