

Respiratory Specialist Clinics at Western Health:

Please note: This document does not cover referrals for

- **Suspected Lung Cancer: Please refer to Access & Referral Guidelines – Lung Clinic**
- **Sleep Disorders: Please refer to Access & Referral Guidelines – Sleep Disorders Clinic**

Western Health provides Specialist Clinics for patients who require assessment and management of Respiratory problems. Patients will be triaged by a Respiratory Physician into one of the following management pathways according to specific clinical requirements.

To optimise the flexibility and facilitate the streaming of patients to the most appropriate clinic we would appreciate a named referral to the Head of Unit: Dr Anne Marie Southcott.

- **Respiratory Rapid Assessment Clinic** – Short term clinic for assessment of a wide range of respiratory problems including, but not limited to, haemoptysis, pre-operative respiratory optimisation, abnormal chest imaging results, pulmonary embolism management and asthma and COPD not requiring chronic/complex management
- **Pulmonary Vascular Clinic** – Provides investigation and ongoing management for patients with pulmonary hypertension and chronic/complex pulmonary thromboembolism
- **Interstitial Lung Disease Clinics** – Specialist Treatment interventions for patients with interstitial lung diseases (ILD) such as antifibrotic and immunosuppressive therapy.
- **Asthma Clinic** – Severe and difficult to treat Asthma requiring advanced and complex treatments.
- **General Respiratory Clinic** – For management of chronic and complex respiratory conditions not specific to other clinic streams.

Conditions not seen by Respiratory Specialist Clinic:

The following common Respiratory conditions are not seen by Respiratory Specialists at Western Health:

- Chronic cough with normal CT chest in the absence of other respiratory symptoms
- Well controlled asthma
- Stable COPD

Conditions that require direct referral to an Emergency Department:

- Acute respiratory/pleural sepsis
- Severe acute breathlessness
- Chest pain
- Significant, acute haemoptysis
- Severe asthma, including thunderstorm asthma
- New onset oxygen saturation < 90%
- Symptomatic pleural effusions

Condition Specific Referral Guidelines:

Key information enables Western Health to triage patients to the correct category and provide treatment with fewer visits to specialist clinics, creating more capacity for care. If key information is missing, you may be asked to return the referral with the required information.

Condition:	Key Information Points:	Clinical Investigations:
<ul style="list-style-type: none"> • Interstitial Lung Diseases • Asthma • COPD • Breathlessness 	<ul style="list-style-type: none"> • Clinical history including severity of symptoms and triggers • Examination findings including oxygen saturation • Impact on functioning including work, study or carer duties • Smoking status and history (cigarettes and all forms of tobacco, nicotine, vaping and cannabis) • Details of any occupational or environmental exposure risks e.g. paints, solvents, asbestos etc, or radiotherapy treatment • Past medical management and response • Current medication list (including non-prescription medicines, herbs and supplements) • Past medical history incl significant respiratory infections • Aboriginal or Torres Strait Islander status 	<p>Breathlessness/ Interstitial Lung Disease/ COPD</p> <ul style="list-style-type: none"> • Previous lung function tests (if available) * • Previous Echocardiogram and imaging reports (if available) • Imaging results recent and past: CXR, and, CT-PA, CT Chest, High-resolution CT chest (Please include report, date and details of the diagnostic imaging practice). • Sputum cultures if available <p>Asthma</p> <ul style="list-style-type: none"> • Previous Spirometry (if available) • Recent blood test results (FBE, UEC) • Other relevant blood tests if available eg IgE total, RAST specific IgE tests, ANCA) <p>* Please note, patients may be given a lung function appointment prior to specialist review</p>
<ul style="list-style-type: none"> • Pulmonary Hypertension • Pulmonary embolism 	<ul style="list-style-type: none"> • Clinical history including severity of symptoms • Examination findings including oxygen saturation • Past medical history including details of previous PE/DVT and cardiac conditions • Details of current anticoagulation treatment (if applicable) and any previous adverse events or risks related to anticoagulation • Current medication list (including non-prescription medicines, herbs and supplements) • Details of any family history of DVT/PE • Smoking status and history (cigarettes and all forms of tobacco, nicotine, vaping and cannabis) • Aboriginal or Torres Strait Islander Status 	<ul style="list-style-type: none"> • Echocardiogram results (if available) • Previous Lung function tests (if available) • Previous Sleep studies (if available) • Imaging reports (recent and past) CXR, and High-resolution CT chest, CT PA, VQ Scan, (Please include report, date and details of the diagnostic imaging practice). • Recent FBE/EUC • INR if on Warfarin