

# Gateway

The Newsletter of EDICS, EDICS Leatherhead and MEDICS Gateway Ltd.

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**Plus: full listings of practices and community clinics**

## Joined up working

This is the first time that news for readers in the three provider organisations working in Epsom, Leatherhead and Elmbridge have been brought together in one newsletter. The similarity of working practices in these areas has meant that more than ever, there is a need for sharing of news and initiatives. The Directors of the three organisations EDICS, EDICS (Leatherhead) and MEDICS Gateway recognise that good ideas travel and that we can all learn from one another and meet regularly to share ideas. This newsletter provides such a forum.

### **EDICS and MEDICS contracts**

After many months of work, the combined attention of officers from Surrey PCT, EDICS, EDICS (Leatherhead), MEDICS and two groups of solicitors, a new form of contract has been agreed with Surrey PCT. This contract which is around 140 pages long, covers the period from April 2008 onwards. The EDICS contract will be mirrored in the contracts for EDICS(L) and MEDICS and gives us four areas of work:

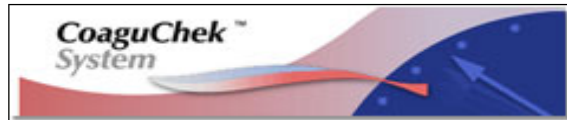
1. The provision of a 'Probity Gateway' to support patient choice in our area. This is an independent part of our services and the contract states that the doctors who work at the Gateway should first respect patient choice and second, select the best option for the patient. This independence from our function as a provider of clinics assures patients get what they want and provides clear separation between the conflicts of interest which can otherwise arise. The 'triagers' also respond to GP

and patient queries and support management decisions. Their independent advice is based upon the best interests of the patient. Wherever possible, the triagers will consider the whole clinical pathway and not merely the out-patient component.

2. Work performed in intermediate care clinics. Some of these clinics are run by EDICS and MEDICS directly. Others are subcontracted from organisations such as Epsom Day Surgery Unit and Ashted Hospital. All provide cost efficiencies for the health care economy.

3. Work to support Choose and Book and patient choice.

4. Work repatriated into practices. These are services coordinated only in the EDICS practices. They include warfarin services for which EDICS receives payment at the same rate as SPCT's Locally Enhanced Service; and for diabetes care. Currently no such services are provided through MEDICS.



## INR and Warfarin News

At the beginning of 2009 EDICS was hopeful that this work would attract what is called 'Level 5' payment. Nationally this level is set at around £250 per patient per year and is paid for group services which provide all governance and supervision of care to patients. However, Surrey PCT have now informed EDICS that since they do not recognise level 5, for the immediate future this work will be paid for at a rate equivalent to the level 4b locally enhanced service (LES). At £200 per patient per year this means that we need to be extremely efficient if we are to break even. Good management of the Coagucheck sticks is key to this. Ensure you use your oldest sticks first and do not let them go out of date. If you have too many sticks, then cancel further orders. This can be done via EDICS or via Roche customer services on 0808 100 9998.

A number of Coagucheck machines seem to have failed recently. If you have problems then contact the sales rep direct (Andrew Sweeney on 07894 418892). Yellow books can be ordered from NHS Team, Polestar, 501 Dewsbury Road, Leeds, LS11 5LL. Tel Customer service 0845 610 1112. The single yellow warfarin books are now considerably cheaper at £3.63 for 50 (including p&p & vat). Polestar also produce Oral Anticoagulation Treatment (OAT) packs which contain helpful information for patients new to warfarin (information booklet, alert card & yellow book) which are £27.58 for 50 (including p&p & vat).

MEDICS is encouraging all their practices to join a similar scheme to that provided through EDICS. This will involve practice staff being trained (an initial 2 hour session) and gaining experience in the techniques involved. As a result, patients will be able to access testing closer to home, without the need for venesection or travel to Kingston Hospital.

We now have a small supply of DVDs available which are intended to help patients who wish to self test using Coagusticks at home. If you would like one of these then please get in touch with Peter Stott.

### Choose and Book

The three gateway organisations have made amazing progress in their use of Choose and Book over the last three months. Now around 80 percent of referrals are coming in electronically. Tribute should be paid to the medical secretaries in the practices and to the PCT teams who have made this possible.

An important contribution at the EDICS end was made by the study session in April, which though somewhat physically challenged by the venue, was attended by secretaries for almost all practices, the Thamesdoc Booking team, Ashted Hospital, Epsom Medical and the PCT.

### Triage training

Since January, new triage doctors have undergone training. At MEDICS, all practices bar one are now represented. At the EDICS gateway the practices represented are: Ashley, Heathcote, Tattenham, Tadworth, Derby, Longcroft, Fairfield, Ashlea, Shadbolt.

Practice representation at triage provides an important contribution to our organisations' success. It offers the opportunity for discussion of peer standards, suggestions regarding innovations in patient care and to develop the concept of federated working. It is also a rapid route through which information can be transmitted back to practices.

### Photodynamic therapy

Photodynamic therapy (PDT) is a relatively new treatment for Bowen's disease, large actinic keratoses and superficial basal cell carcinomas—particularly when they occur at sites which would be difficult to treat with surgery, such as on the anterior shin or cosmetically sensitive areas. The treatment has been provided through the EDICS dermatology service for the last six months. We are one of very few sites in Surrey providing this service and as a consequence we have been receiving referrals not only from local GPs but also from our local hospital Trust.

After preparing the lesion, a cream containing methyl aminolevulinate is applied. Over the next three hours, the active agent is taken up into cancerous and pre-cancerous cells. At the end of this time the area is illuminated with an orange light which activates the chemotherapeutic agent. During the next week, this kills the cancerous cells. A second treatment is given one week later.

During the phase of light treatment, patients may experience tingling or skin irritation; but generally side effects are mild. We have had exceptionally good results with all patients seen so far. Dr Jane Rosbotham is lead consultant for this service.



Fig 1 and 2: BCC on ear at start of treatment and the same area 4 weeks later after PDT



Fig 3: Patient undergoing Photodynamic therapy



### Diabetes care

Surrey PCT has recently brought together a group to study the inequalities which exist in diabetes care across Surrey and to make proposals which would 'level the playing field'. This difficult task will involve equalising payments made through LES systems, improving access to diabetic specialist nurses in under-provided areas, integration of community and hospital services, and education to develop the confidence of practices to manage patients stable on insulin.

EDICS has provided a range of initiatives locally which are intended to improve financial flows into practices and enable them to improve access and services for patients. These initiatives include:

- Incentives to repatriate patients from hospital clinics
- Incentives for practices who initiate insulin for their patients
- Incentives for practices who maintain their patients on insulin in the practice

EDICS also runs an intermediate care clinic where patients' treatment can be stabilised before they are returned to their practices. This clinic which is staffed by Dr Sally Hudson (GPSI), Sue Hamilton (diabetic specialist nurse) and Beverly Watson (Health care Assistant) runs every other week at the Ebbisham Centre. Because the staff are not available every day, this clinic does not take patients for insulin initiation.

In Elmbridge, MEDICS also have plans to start an intermediate care diabetic clinic. This will probably be run at Molesey Hospital by GPSI Julie Llewelyn. Dr Llewelyn currently works with consultant diabetologist Mark Spring at Kingston Hospital who will be her mentor for discussion of clinic patients.

### MEDICS dermatology clinic

A MEDICS dermatology clinic began in April. This uses an innovative clinical structure in which Dr Jane McCahy (GPSI dermatology) and a consultant dermatologist from Kingston Hospital are working in conjunction with Dr Theresa Mitchell who as well as being a GP, is also an honorary registrar in plastic surgery at Kingston Hospital. Her mentor is Mr Mark Soldin.

Clinical diagnoses are made by Dr McCahy and her consultant colleague. Where surgery is required, this is undertaken by Dr Mitchell at the same visit. This frees up the dermatologists to spend more time with patients.

The clinic runs at Thorkhill Surgery and is currently coordinated by Dr Hazim Taki. Dr Taki is also a GP at Thorkhill and a MEDICS triager.



Thorkhill Surgery

### EDICS Acne clinic

The EDICS dermatology service is now able to accept referrals for consideration of isotretinoin (formerly only available as Roaccutane). This clinic is lead by consultant dermatologist Dr Jane Rosebotham. GPs are asked to include the relevant investigations with their referral letter. These are listed on the website [www.edics.co.uk](http://www.edics.co.uk)

### **MEDICS ophthalmology, neurology and ultrasound**

The ophthalmology clinic at Glenlyn Surgery has been expanded with the addition of Miss Ank Mazure to the clinical staff. Ank holds a consultant appointment at Cobham Day Surgery Unit. She now works alongside Mr Simon Horgan from Kingston Hospital. Where day-case surgery is required, patients can be offered a choice of either Cobham DSU or Kingston Hospital. The nurse coordinator at Glenlyn is Diana Elsdon.

A neurology clinic started in March at Emberbrook Community Centre for Health. This is staffed by GPSI Dr Nassif Mansour who has long experience working in this role in the Kingston and Surbiton area. The clinic runs nearly every week on a thursday morning. Headaches are a particularly common cause for referral and these should be made according to the Kingston protocol which is available as a download on the website.

Ultrasound is now available at Molesey Hospital. Timing is coordinated to support the urology clinic there.

### **Assuring Access/A&E**

Surrey PCT has asked IHP (Integrated Health Partnership) to manage a 'diagnostic' process to identify areas where savings could be made in the care provided in the Accident and Emergency Department at Epsom General Hospital. Both local Practice based Commissioning Groups (ie Mid Surrey Commissioning Group and MEDLInC) are collaborating with them on this.

The diagnostic process is being coordinated by the PCT's Assuring Access Board to whom IHP will report. Other contributors include Thamesdoc and Epsom and St Helier Trust.

The diagnostic process is scheduled to report by May 2009.

In Elmbridge, the MEDICS medical directors are working with Kingston Hospital, Central Surrey Health and Thamesdoc to identify whether it would be possible to provide an out-of-hours service at Molesey Community Hospital. A number of ideas are under consideration including the use of portacabins and extending the hours for which the XRay Department is available.

### **Website**

The EDICS and MEDICS websites have been re-engineered and now contain many important documents which are available for download. Several GPs have already commented how useful they are and that they keep the site open on their desktop during consultations.

Available downloads include referral management tools, application forms for gastric banding and low-priority procedures, a full set of two week-rule referral forms and many other important documents.

If you would like further items to be attached or find problems with what is already available, then please contact [peterstott@edics.nhs.uk](mailto:peterstott@edics.nhs.uk).

### **Neurology services at NEECH**

A local GPSI has joined the neurology team at the New Epsom and Ewell Community Hospital. Dr Goshka Trubshaw will be well-known to some since she has worked as a GP in local practices, and in conjunction with the neurology team at East Surrey Hospital for a number of years. She is a fully qualified GPSI, working with Drs Steven Wilson and Paul Hart and the rest of the NEURO-PACT team. Her specialities are headache and epilepsy.



### Directors salaries

There have been a number of instances in the press recently where the level of reimbursement of officers in public organisations has been questioned. Shareholders in EDICS, EDICS(L) and MEDICS Gateway are reminded that they are able to examine the contracts of any of the Directors by appointment. To avoid controversy, the EDICS directors recently made their contracts public at an informal shareholders meeting.

### Staff changes

Victoria Eves has joined the staff of MEDICS Gateway as an office administrator.



Karen Godwin has joined the staff of MEDICS Gateway as an office administrator.

Anne Terry has joined the EDICS dermatology team as Health Care assistant.



### Dr Steven Breathnach

Dr Steven Breathnach has now left the EDICS dermatology service because of work demands elsewhere.

### Gastroenterology

Epsom General Hospital and Kingston are major providers of gastroenterology services to our patients. Recently, Ashted Hospital (Ramsay Healthcare) has also begun to offer this service to patients through Choice. Patients attending this clinic are given half hour consultations. Ashted feel this provides great efficiencies and enhances patient satisfaction. Most patients are managed in one episode; but to achieve such cost-efficiencies necessary, all cases are discussed with the consultant gastroenterologists at booking and any necessary investigations ordered at that point, before the patient is seen for the first time.

Practices have been circulated with leaflets indicating which investigations are appropriate for different types of referral. The referral guide together with forms to refer for direct access gastroscopy can be downloaded from the EDICS and MEDICS website on

[www.edics.co.uk](http://www.edics.co.uk) or  
[www.MEDICSGateway.com](http://www.MEDICSGateway.com)

### Letter of the Quarter

Every three months, MEDICS Gateway presents a prize to the doctor who, in the opinion of the triage team, has written the best referral letter. The prize this quarter went to Dr Richard Strickland from the Glenlyn Surgery who is seen on the left receiving it from Steve Brant, Medical Director.





### Patient pathways

Out-patient management is only one part of a patient's journey through the maze of the NHS. Many patients require access to further diagnostics, day case work or even in-patient stays. The Gateway organisations have always worked to make clinical pathways as efficient as possible by ensuring cases are fully worked-up before they are referred, ordering further higher-level investigations where appropriate, and by early discussion of cases with consultant colleagues and GPSs.

Now we are beginning to formalise these pathways with our specialist colleagues. Some of these protocols appear on the EDICS and MEDICS web-sites and we would encourage clinicians to adhere to these wherever possible.

Access to higher level investigations is becoming more necessary. MEDICS GPs already have agreed protocols for referring for CT. Now discussions have begun with the radiologists from Epsom for cases thought to need a CT or MRI to be referred to them by letter.

Details of this initiative will be announced later. Headache is a common reason for these investigations. So the Kingston headache protocol shown here is essential reading for MEDICS GPs. Use of this protocol has been shown by the radiologists at Kingston to be cost-effective in that it reduces the need for neurological referral.

Patients too are beginning to use the Gateway services when they meet problems with their referrals. We are debating with the patients' group how access might be formalised such that they can discuss their referral with a specialist triager. This is a concept which is not without its problems and we would be grateful for comments from practices on this idea.

**KINGSTON HOSPITAL NHS TRUST**  
Galsworthy Road Kingston upon Thames Surrey KT2 7QB -  
Tel: 020 8546 7711 Ext: 2839

**SURNAME:**  
**FIRST NAME:**  
**DATE OF BIRTH:**  
**ADDRESS:**  
**PHONE NO.**  
**MALE / FEMALE**

**RADIOLOGY DEPARTMENT**

**GP DETAILS:**  
**GP PRACTICE CODE:**  
**FAX NO:**  
**NHS/PRIVATE:**

**PATHWAY FOR CT HEAD REFERRAL IN A PATIENT WITH CHRONIC PERSISTENT HEADACHE**

**PLEASE TICK BOXES BELOW:**

Patient consults with headache

↓

After headache and medical history are there any red flag features

↓

**NO**

Is there any abnormal neurology or abnormal examination

↓

**NO**

AS PRIMARY TREAT HEADACHE DISORDER

RED FLAG FEATURES		No	Yes
New onset of headache in patient	> 50	<input type="checkbox"/>	<input type="checkbox"/>
Increasing frequency + severity of headache		<input type="checkbox"/>	<input type="checkbox"/>
Headache that bothers/wakens patient		<input type="checkbox"/>	<input type="checkbox"/>
History of malignant disease/HIV		<input type="checkbox"/>	<input type="checkbox"/>
Focal neurological signs	Or	<input type="checkbox"/>	<input type="checkbox"/>
Signs of disease		<input type="checkbox"/>	<input type="checkbox"/>
Papilloedema		<input type="checkbox"/>	<input type="checkbox"/>

if YES to any

↓

**REFER FOR CT HEAD**

If routine Rx does not lead to anticipated improvement	Y	N	
Or	<input type="checkbox"/>	<input type="checkbox"/>	
Or	<input type="checkbox"/>	<input type="checkbox"/>	
Or	<input type="checkbox"/>	<input type="checkbox"/>	
Or	<input type="checkbox"/>	<input type="checkbox"/>	
Or	<input type="checkbox"/>	<input type="checkbox"/>	

if YES to any

• FOR KINGSTON HOSPITAL Walk in Service 9-4.30 Mon-Thursday Rowan Bentall Wing (Request form to patient)

**GP SIGNATURE** .....

**POSSIBILITY OF PREGNANCY** YES / NO

## EDICS Database: June 2009

### **EDICS email addresses**

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Nigel McKee: Director	<a href="mailto:Nigel.Mckee@gp-h81051.nhs.uk">Nigel.Mckee@gp-h81051.nhs.uk</a>
Peter Stott: Medical Director	<a href="mailto:peterstott@edics.nhs.uk">peterstott@edics.nhs.uk</a>
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Tel: 01372 738383

Fax: 01372 738388

### **Epsom Practices**

Integrated Care Partnership  
 Old Cottage Hospital: 0844 412 2232  
 Fitznells Manor: 0844 412 2232  
 Bourne Hall Health Centre  
 Spring Street Surgery: 020 8394 1362  
 Fountain Practice: 020 8394 2367  
 Derby Medical Centre: 01372 726361  
 Ashley Centre Surgery: 01372 723668  
 Auriol Medical Centre: 020 8337 5533  
 Shadbolt Park Surgery: 020 8337 3966  
 Stoneleigh Surgery: 020 8393 6051  
 Stoneleigh Medical Centre: 020 8786 7444  
 Longmead Surgery: 01372 743432  
 Cox Lane Surgery: 020 8391 4859

### **EDICS Co-ordinator**

[caroline.stent@gp-h81133.nhs.uk](mailto:caroline.stent@gp-h81133.nhs.uk)  
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[evelyn.cupit@gp-h81613.nhs.uk](mailto:evelyn.cupit@gp-h81613.nhs.uk)  
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[c.lawlor@gp-h81133.nhs.uk](mailto:c.lawlor@gp-h81133.nhs.uk)  
[reception@gp-h81100.nhs.uk](mailto:reception@gp-h81100.nhs.uk)

### **Banstead and Reigate Practices**

Heathcote Medical Centre: 01737 360202	<a href="mailto:les.trewinnard@gp-h81070.nhs.uk">les.trewinnard@gp-h81070.nhs.uk</a>
Longcroft Medical Centre: 01737 359332	<a href="mailto:barbara.thwaites@gp-h81080.nhs.uk">barbara.thwaites@gp-h81080.nhs.uk</a>
Nork Clinic: 01737 362211	<a href="mailto:zahid.ali@nhs.net">zahid.ali@nhs.net</a>
Tattenham Health Centre: 01737 371011	<a href="mailto:caroline.hodder@gp-h81126.nhs.uk">caroline.hodder@gp-h81126.nhs.uk</a>
Tadworth Medical Centre: 01737 362327	<a href="mailto:lesley.renwick@gp-h81081.nhs.uk">lesley.renwick@gp-h81081.nhs.uk</a>

### **Leatherhead Practices**

Ashlea Medical Centre		
Linden House	01372 375666	
Gilbert House	01372 276385	<a href="mailto:lshabrokh@nhs.net">lshabrokh@nhs.net</a>
Molebridge		
Cannonside	01372 379941	
Kingston Road	01372 362099	<a href="mailto:kevin.spurling@gp-h81618.nhs.uk">kevin.spurling@gp-h81618.nhs.uk</a>
Fairfield Medical Centre	01372 455450	<a href="mailto:chris.boughey@gp-h81016.nhs.uk">chris.boughey@gp-h81016.nhs.uk</a>

Please advise EDICS if any of these details change or are incorrect



## EDICS Intermediate Care Services: June 2009

Practices should direct their referrals to the EDICS community clinical services and to secondary care clinical services via the Gateway. There is no need to specify any particular clinician. A telephone advice service is also available from the Triage desk on 01372 738383. Please use the standard referral template.

Cardiology:	Shadbolt: Dr Hywel Bowen-Perkins (GPSI), Dr Alun Jones (GPSI), Dr Sola Odemuyiwa. Leatherhead: Dr John Wong (GPSI) Dr Charles Pumphrey
Child Health:	Tattenham: Dr Janet Nichols, Dr John O'Connell, Dr Liz Barr, Dr Helen Cotton, Nurse coordinator Sue Lynch Leatherhead Clinic; Dr Alison Anderson, Dr Sabina George, Dr Maria Garcia, Carol Manuel (Lead Nurse)
Dermatology:	Dr Paul Steventon (GPSI), Dr Alex Navamani (GPSI), Dr Jane Rosbotham, Sister Anita Webb (DSN), Anne Terry (HCA)
Allergy:	Amina Warner (Specialist Nurse, St Helier Hospital)
ENT:	Dr Alex Watson (GPSI), Mr Ravi Hehar, Mr Peter Williamson, Mr Abbad Toma, Dr Robin Yeoh, Dr Aad Rudolphy, Dr Albekerkey
Gastroenterology:	Drs Asif Mahmood, Samir Zar, Guan Lim, Stuart Gould, Simon Moody (consultants, Ashtead Hospital)
Gynaecology	Mrs V Kakumani (consultant), Dr Elena Cochrane (GP lead) Dr Lynn Davis (GP Lead)
Minor Surgery (Cats B&C):	Dr Masood Ahmad FRCS (GPSI), Dr Stephen Barr FRCS (GPSI)
Musculoskeletal:	Dr John Reynolds, Citisport physiotherapy team Jill Goss, Poplars ESP Team, Geoff Thiselton (upper limb ESP) Dr Chris Monella (GPSI back pain), Miss Anne Mitchener (neurosurgeon), Wendy-Anne Harrison (ESP), Suzy Marsh (podiatry lead)
Neurology:	Dr Stephen Wilson, Dr Paul Hart, Dr Goshka Trubshaw, The NEECH NeuroPACT team
Surgical Orthopaedic:	Dr Kate Laws (GPSI) and Mr Roy Twyman Mr Martin Bircher, Mr Andrew Cobb, Dr Deepak Pabari (podiatric surgeon)
Surgical and colorectal:	Mr Ashraf Raja, Mr Sami Farhat, Mr Paul Thomas, Mr Dhiren Nehra, Mr Bob McFarland
Plastic and hand surgery:	Mr Geoff Wilson, Mr Andrew Lyons, Mr Tony Moss
Diabetes:	Dr Sally Hudson, Sister Sue Hamilton DSN, Beverley Watson HCA
Ophthalmology:	Mr Ian Gillespie, Miss Ank Mazure Consultant ophthalmic surgeons; Mrs Jane Goodwin, specialist nurse, ophthalmology; Dr Subo Emmanuel (GPSI)

### EDICS open access services

Upper GI endoscopy:	Epsom Day Surgery Unit, Cobham Day Surgery Unit, Ashtead Hosp
Ultrasound:	Bourne Hall Health Centre (Book via OCH) Leatherhead Community Hospital (via Surrey Ultrasound Services) Shadbolt Park Surgery, Heathcote Medical Centre, Emberbrook Health Centre (Book ultrasound via Shadbolt)
24-72 hour ECG	Shadbolt Park Surgery, Gilbert House
24 hour blood pressure:	Shadbolt Park Surgery, Heathcote Medical Centre

*To access 24-72 hour ECG, please send a referral letter to EDICS. Send Ultrasound forms and X-Ray Forms direct to the agency involved. Send endoscopy forms to EDICS. If you need more forms, contact Kerry Tarling or Kate Harper at EDICS*

## MEDICS Database: June 2009

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### **MEDICS email addresses**

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### **MEDICS Practices:**

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The Vine Medical Centre  
Thorkhill Surgery  
Giggs Hill Surgery  
Capelfield Surgery  
Littleton Surgery  
Lantern Surgery  
Esher Green Surgery

### **Telephone**

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01372 462726

### **MEDICS Coordinator**

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## MEDICS Intermediate Care Services

Cardiology:	Dr Arvind Vasudeeva (consultant), Dr Avtar Kamboj (GP), Dr Steve Brant (GP) - Emberbrook
Child Health:	Dr Vinay Pai, Andrew Winrow, Eman Jurges, Dr Andrea Beaton (consultants), Dr Hazim Taki (GP) - Emberbrook
Dermatology:	Dr Jane MacCahy(GPSI), Dr Teresa Mitchell, Dr K Misch
ENT:	Mr Peter Williamson, Mr Abbad Toma, Dr Robin Yeoh, Dr Albuquerque (consultants) and Dr Dino Pardhinani —Emberbrook
Musculoskeletal/orthopaedic:	Mr Gil Railton, Mr Mark Curtis, Mr Paul Davey (consultants), Mrs C Bracewell (ESP), Alison Harley (ESP), Amanda Clifford (ESP) Molesey Community Hospital
Gynaecology:	Mr Onsy Morris (consultant), Dr Alison Shine (GP), Dr Fergus Keeting (GP) - Emberbrook
Neurology:	NEECH NeuroPACT team (MS and PD only), Dr Nassif Mansour (GPSI) - Emberbrook
Ophthalmology:	Mr Simon Horgan, Miss Ank Mazure - Glenlyn
Podiatric surgeon:	Mr Ramish (Molesey Hospital), Dr Deepak Pabari (podiatric surgeon, CDSU)
Plastic surgery:	Mr Geoff Wilson, Mr Tony Moss (CDSU)
Urology	Mr Roland Morley, Dr Ali Rangawala (Molesey Community Hospital)

### **MEDICS open access services**

Upper GI endoscopy:	Cobham Day Surgery Unit
Xray	Cobham Day Surgery Unit
Ultrasound:	Emberbrook Health Centre, Molesey Hospital (Book ultrasound via Shadbolt)
MRI, CT:	Fax referral forms to MEDICS

*Send Ultrasound forms and X-Ray Forms direct to the agency involved. Send endoscopy forms direct to CDSU.*

*If you need more forms, contact Lynn Siveyer at MEDICS*

Please advise MEDICS if any of these details change or are incorrect

## What is a Gateway referral and what is not – an aide memoir (June 2009)

In order to coordinate Gateway referrals with Choose and Book, this listing shows the commonality between them. Choose and Book contains many clinic which cannot be shown in this way. Where there is doubt, the Gateway Teams will help decide.

Green = original Gateway categories  
Black—Choose and Book terminology

<b>Please send us referrals for the following</b>	<b>Please DO NOT send us referrals for the following, send them direct</b>
Audiology (Audiology)	A and E referrals
Allergy (Immunology and Allergy)	
Breast Clinic (Surgery Breast)	Antenatal
Cardiology (Cardiology) (Rapid Access Chest Pain Clinic Fax direct and copy to Gateway)	Anaesthetics ie pain clinic (Sutton, Kingston)
Chest Clinic (Respiratory Medicine)	
Child Health/Paediatrics (Child and Adolescent Services)	DEXA scans
Colposcopy (Gynaecology)	Dietetics
Dermatology (Dermatology)	Fracture Clinic
Diabetic Medicine (Diabetic Medicine)	Genetics
Dizzy Clinic (ENT)	Maxillo Facial (via Trusts)
Endocrinology (Endocrinology)	Memory Clinic and Mental Health
Colo-rectal and Colonoscopy (GI and liver)	Nerve Conduction (St Helier)
ENT (ENT)	Obstetrics
Foot Surgery (Orthopaedics)	Physiotherapy
Gastroenterology (GI and liver)	Podiatry Therapy
General Surgery (Surgery NOS)	Psychiatry
Geriatric Medicine (Geriatric Medicine)	Termination of Pregnancy
Gynaecology (Gynaecology)	Thames Doc referrals
Immunology (Immunology)	Tissue Viability (EGH, Kingston)
Nephrology (Gen Medicine)	
Neurology (Neurology)	Clinical Haematology
Ophthalmology (Ophthalmology)	Upper GI endoscopy (gastroscopy)
Orthopaedics (Orthopaedics)	Pain Management (other than backs)
Back Pain Clinic (Orthopaedics)	
Plastics (Plastics)	
Rheumatology (Rheumatology)	
Urology (Urology)	
Vascular surgery (Vascular Surgery)	
Warfarin Clinic (Haematology)	