

Chronic Pain Management Service Bentley Referral Form

Please fax completed referral form to (08) 9458 0555

Date of referral: _____

Office Use Only: Patient Code: _____

PATIENT CONSENT			
I (the patient), give consent to participate in the Chronic Pain Management Service Bentley and for all Arche Health Ltd staff to access my medical information and share with contracted allied health professionals who are contributing to my care. I understand that my medical information will remain confidential. Some data that will not identify me, my Practice or my GP, will be given to the Department of Health to enable the program to be evaluated.			
Patient Signature		Date	
Have you previously seen a Pain Specialist?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
REFERRER INFORMATION			
Referrer Name			
Practice Name			
Practice Address			
Practice Phone		Signature	
If referred by a physio please provide GP details			
PATIENT INFORMATION			
Patient Name			
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	DOB
Address			
Phone (Home)		Phone (Mobile)	
PAIN INFORMATION <i>(please tick appropriate diagnosis)</i>			
<input type="checkbox"/> Back Pain	<input type="checkbox"/> Rheumatoid Arthritis	<input type="checkbox"/> Fibromyalgia	
<input type="checkbox"/> Neck Pain	<input type="checkbox"/> Osteoporosis	<input type="checkbox"/> Migraine	
<input type="checkbox"/> Osteoarthritis	<input type="checkbox"/> Complex Regional Pain Syndrome	<input type="checkbox"/> Endometriosis	
Other medical information: _____			
Has the patient been hospitalised in the last 12 months?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide details (e.g. number of admissions, length of stay)			
Current Treatment/Therapy <i>(please attach GPMP and TCA if eligible)</i>			
Current medications <i>(NB. Alternatively, please attach existing list to referral form)</i>			
Eligibility: Please refer to the next page for eligibility and exclusion criteria.			



Chronic Pain Management Service Bentley Referral Form *(continued)*

PROGRAM INFORMATION AND ELIGIBILITY CRITERIA

Arche Health is now taking referrals into the **FREE Chronic Pain Management Service Bentley**.

The program initially involves referred patients attending a series of group education sessions over 2 days. These sessions are run collaboratively by a;

1. Clinical Psychologist
2. Physiotherapist
3. Pain Specialist

The **Chronic Pain Management Service Bentley** is a broad approach to the management of the patient's pain, with the emphasis of involving the patient in every step of their care, by providing them with accurate information about the management of pain.

Up to date information and advice about the most effective management strategies for chronic pain, including medications and procedures, movement and exercise, pacing everyday activities and approaches to pain are presented to patients.

As part of the program, all patients will be scheduled into individual clinics with each health professional, 4-6 weeks post Chronic Pain Management Service Bentley, to develop a pain management plan after putting their learning from group sessions into practice. This will give program participants time to implement what they learnt from the group education. Patients then return to their GP to discuss and implement their Pain Management Plan.

All sessions will be held in the Arche Health Bentley offices.

BELOW IS THE ELIGIBILITY CRITERIA FOR THE COMMUNITY PAIN MANAGEMENT SERVICE:

Criteria	Eligible	Ineligible
Chronic Pain min. 3 months	✓	
Living within the Arche Health catchment area	✓	
Visiting a GP within the Arche Health catchment area	✓	
Suitable for group education	✓	
Will complete a pre-entry questionnaire	✓	
Can understand English	✓	
Ability to give voluntary, informed consent for ongoing collection of data	✓	
Patients on a high dose of opioids	✓ May be seen by the Pain Team prior to admission	
Patients with probable dominant herpetic neuralgia	✓ May be seen by the Pain Team prior to admission	
Patients with possible diabetic neuropathy	✓ May be seen by the Pain Team prior to admission	
Palliative cancer pain		x
Require interpreter		x
Urgent triage referral		x
Unstable mental health condition		x
Incarcerated patients		x
Under 18 years of age		x

For further information, please contact the Chronic Pain Management Coordinator on 9458 0505 or email cpms@archehealth.com.au