

Triage Referral Prioritization Process

New referrals will be assigned designations based on relatively consistent criteria:

1. Urgent (<1 week)
 - a. Pathophysiology
 - i. Malignancy
 - ii. Ischemia (cardiac or peripheral vascular)
 - iii. CRPS
 - iv. Neuropathic (new onset radiculopathy)
 - b. Disposition
 - i. In-patient
 - ii. Recently bed-ridden or changed to non-ambulatory
 - iii. Necessary work stoppage within the last 2-4 weeks (intervention may restore them sooner)
 - c. Medication
 - i. Methadone
2. Intermediate (appropriate investigations, referral and initial management have been completed though early intervention may not necessarily improve prognosis)
3. Insufficient Information or Inappropriate referral
 - High suicidal risk-should first be directed to mental health specialist.
 - Imaging/basic investigations have not been forwarded or completed.
 - Other specialty may better serve patient before our evaluation (i.e. Hip pain from OA should have an orthopedic opinion)