



# Specialty Consult Referral Guidelines

updated 10/2018

**All referrals must be non-emergency, outpatient & elective.**  
**Available services depend on availability of volunteer doctors.**

*IMPORTANT: Should the results of the SPIRIT donated consult and, if scheduled, donated outpatient surgery/procedure indicate that additional clinical follow-up is appropriate, it is the patient's responsibility to schedule and arrange payment for these services should they decide to pursue such follow-up care. SPIRIT does not arrange for or provide coverage for follow-up care. Referring clinic maintains responsibility for care after procedure and final appointment.*

REFERRAL TYPE	CRITERIA FOR ELIGIBILITY
<b>ENT</b>	
Surgery Consult ONLY	<i>Limited appointment availability; wait may be 6-12 months.</i> Nodule referral must include radiology and benign biopsy results. Hearing loss referral must include hearing test (audiogram) results.
<b>GASTROENTEROLOGY</b>	
Colonoscopy	NOT accepting referrals for GI office consult. Diagnostic only; NO routine screenings. <i>Limited appointment availability; wait may be 6-12 months.</i> <i>Referring PCP must submit 2018 SPIRIT Referral Form signed by patient.</i>
EGD	At least <u>one</u> of the following: - bleeding - dysphagia - patients with GERD - continued upper abdominal pain despite negative stool test for H. pylori
<b>GENERAL SURGERY</b>	
Cholecystectomy	Must include radiology confirming cholelithiasis.
Hernia	Radiology NOT required; provide if available.
Breast Cyst	Must include radiology & benign biopsy results.
Hemorrhoidectomy	Surgical referrals should be reserved for cases in which symptoms are severe and persist despite attempted preventative measures.
Lipoma, Cyst	Must be symptomatic if <2cm; identify the size and location; radiology (if available).
<b>GYN</b>	
Surgery Consult ONLY	Surgery consult only (no hysterectomy); provide all relevant imaging for referring diagnosis.
<b>OPHTHALMOLOGY</b>	
Cataract	Include vision test or optometrist notes if present in chart; some surgeons require 20/80 vision or worse to be eligible for donated surgery.
Diabetic Retinopathy	NOT accepting referrals for screening or treatment.
Glaucoma	NOT accepting referrals for treatment of glaucoma.
Pterygium	Appropriate if ANY of the following are true: - continued debilitating irritation/redness despite regular use of precautionary measures and artificial tears - grown so large that it is starting to block the pupil (not just the cornea) - optometrist confirms that it has caused a vision change
Retinal	Appropriate if ANY of the following is true: - retina damage diagnosed in emergency room; include all relevant documentation - ophthalmologist has recommended retinal surgery evaluation
Vision Exam, Glasses	Worsening or changed vision; free glasses as may be needed. If patient is diabetic, include A1C level in medical record.
<b>ORTHOPEDIC</b>	
Eligible Cases	Hand, shoulder, knee cases that are likely outpatient; include all available and relevant radiology; referring PCP must guarantee post-operative physical therapy.
Ineligible Cases	Urgent fractures; hip cases; partial or full knee replacement; knee arthroscopy for patients with severe arthritis; physical therapy.
<b>PULMONOLOGY</b>	
Consult, PFT	Pulmonologist will determine need for pulmonary function test (PFT).
<b>UROLOGY</b>	
Surgery Consult ONLY	Kidney stone and hydronephrosis referrals must include radiology; phimosis.