

SHROPDOC COVID MANAGEMENT
SERVICE
(CMS)



PATIENT REFERRAL FORM

Guidance

Please use this form to refer **Category 2 patients** with patients with high suspicion of Covid-19 infection fitting the clinical criteria of:

- New onset continuous cough +/-
- Temperature > 37.8c.
- Removal of other likely differentials following clinical consultation (usually by phone) such as acute sinusitis/tonsillitis.

Category 1 patients - should be referred immediately to 999

Category 2 patients – home isolation with CMS access and monitoring

Category 3 patients – self isolation, safety netting and contact 111 if symptoms change.

Refer patient to the Shropdoc CMS with brief EMIS summary via secure email to:

shropdoc.cms@nhs.net

Following referral during surgery opening hours a clinician will call the patient back to confirm category 2 status following referral and reinforce safety netting, isolation advice and discuss daily symptom monitoring and arrange open access to the service whilst unwell.

Patients who are classed as category 2 risk:

- people who have received an organ transplant and remain on ongoing immunosuppression medication
- people with cancer who are undergoing active chemotherapy or radiotherapy
- people with cancers of the blood or bone marrow such as leukaemia who are at any stage of treatment
- people with severe chest conditions such as cystic fibrosis or severe asthma (requiring hospital admissions or courses of steroid tablets)
- people with severe diseases of body systems, such as severe kidney disease (dialysis).

1) Aged 70 years and over

2) Any age with an underlying health condition listed below (ie anyone instructed to get a flu jab as an adult each year on medical grounds):

<u>First Names:</u>	End
<u>Last name:</u>	Testtransfer
<u>NHS Number:</u>	?100002
<u>Date of Birth</u>	01-Jan-1993

<u>Phone:</u>	
<u>Phone2:</u>	
<u>Email:</u>	
<u>Address:</u>	Hill Crest, Knockin Heath, Oswestry, Shropshire, SY10 8ED

Referrer information

Practice name:	KNOCKIN MEDICAL CENTRE	Phone: 01691682203
Referrer name:	John	
GMC/NMC/HPCPC:	1234	

Confirmation

- I have assessed the clinician condition of the patient and confirm the most likely clinical impression of the patient is Covid-19 infection.
- The patient is suitable within category 2 management within the CMS.
- I have provided safety netting to the patient and current information on [self-isolation](#) whilst awaiting a call back.

Please attach a brief EMIS summary to the referral.

Additional Information

Name:	NHS No:	Date of birth:
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Medication

Acute

Drug	Dosage	Quantity	Last Issued On
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Repeat

Drug	Dosage	Quantity	Last Issued On
Desogestrel 75microgram tablets	One Tablet Daily At The Same Time Each Day	84 tablet	28-Mar-2019

Problems

Active

Date	Problem	Associated Text	Date Ended
11-Jun-2001	Bronchopneumonia		

Consultations

Date	Consultation Text
22-Aug-2019 Document	KNOCKIN MEDICAL CENTRE STRINGER, Karen (Dr) Palliative care assessor: professional 7f719dfe-a642-42c0-b7cc-65e5f9e6281b