



NSW Ambulance Protocol P5 patient referral to general practitioners

NSW Ambulance along with the Primary Health Network (PHN) aim to further enhance primary health care in the community by strengthening links between paramedics and general practice. This will encourage greater collaborative decision making between the patient, paramedic and general practitioner (GP) where assessment and treatment within the Emergency Department (ED) is not clinically required.

HOW MANY PATIENTS AM I LIKELY TO ENCOUNTER FROM NSW AMBULANCE REFERRALS?

With the general spread of GP practices it would be unlikely that any individual practice would have in excess of two referrals on any one day. Many practices may have periods without any referrals from NSW Ambulance due to demographics and acuity of Triple Zero (000) cases.

HOW DO I RECEIVE A REFERRAL FROM A PARAMEDIC?

You will be identified by the patient as their regular GP or primary care provider. The paramedic may telephone your practice identifying themselves as a paramedic. They will request to speak to you to provide a brief patient summary, allowing you to accept the patient or recommend the ED should you have any clinical concerns. On occasions where a verbal clinical handover has not taken place, a paramedic referral letter will be left with the patient to give to you at their subsequent appointment, outlining clinical assessment findings, treatment performed and advice given.

HOW SOON DO I NEED TO SEE THE PATIENT?

Once you agree to review the patient at your practice, the patient would be transported from their residence by family members at the agreed time. The patient will be able to sit in the waiting room until you can facilitate their assessment. If you do not have the capacity to review the patient within a time frame clinically appropriate for the presenting condition, advise the paramedic prior to accepting care so alternate arrangements for the management of the patient can be arranged.

SHOULD I BE CONCERNED THAT I WILL BE REFERRED HIGH ACUITY PATIENTS UNSUITABLE FOR GP CARE?

No. Paramedics will be using clinical assessment tools and protocols to ensure patients do not meet any clinical high risk criteria or exclusion for alternate referral options, as well as undertaking a thorough patient history and physical examination to apply clinical judgement. The risk is likely to be less than patients who normally attend your practice as paramedic referrals will have already been screened for suitability.

IF I ASSESS THE PATIENT AND FEEL THEY WOULD BE BETTER MANAGED IN AN ED, WHAT DO I DO?

The patient can be treated in the same way as any patient who presents to the practice and then requires referral to an ED for further management. The patient can be transported by family if available and the condition does not require active monitoring or treatment. Alternatively, if an ambulance is required urgently, please call Triple Zero (000).

WHAT HAPPENS OUT OF DESIGNATED PRACTICE HOURS?

Unless specific arrangements are in place, paramedics will not contact a patient's GP after hours. Paramedics may attempt to refer the patient to a designated after hours service if available. In the first instance, this will be through your preferred after hours provider.

CAN I PROVIDE FEEDBACK AS TO THE SUITABILITY OF THE PARAMEDIC REFERRAL?

Yes. NSW Ambulance considers GPs to be an important stakeholder and your feedback is valued. A NSW Ambulance Healthcare Provider Feedback form is available, enabling you to provide feedback regarding the suitability of the patient referral or any concerns that may need addressing. Alternately you can email your feedback to ambulance-clinicalintegratedcare@health.nsw.gov.au.