

Rapid access request

The rapid access request is designed to be used by the general practitioner (GP) and specialist when follow-up raises a clinical issue requiring urgent specialist consultation or advice.

The rapid access request is not to be used as a substitute for existing referral arrangements between GPs and specialists.

FROM

GP name

Practice address

State Postcode

Phone no.

Fax no.

Email address

TO

Specialist name

Specialty

Address

State Postcode

Phone no.

Fax no.

Email address

PATIENT DETAILS

Patient name

Date of birth

Address

State Postcode

Mobile no.

Home/Work no.

Specialist input required

Urgent consultation

Urgent advice

Clinical concerns
(description of symptoms and/or test results triggering rapid access request)

GP's name and signature

Date

OUTCOME OF SPECIALIST CONSULTATION

Usually to be completed by the specialist, but may be completed by the GP at the time of phone conversation if phone advice only is received.

Outcome

Further action required Yes No

If yes, detail further action _____

Continue shared care?

Yes No

If no, care transferred to _____

Specialist's name and signature (if appropriate)

Date

Contact option

GP to specialist Phone Letter Email

Specialist to GP Phone Letter Email