**Golden Jubilee National Hospital**

 **Cardiac Surgery - Emergency / Urgent / Non Urgent Referral Form**

**Referrals contact Cardiothoracic Registrar On-Call (CROC) at GJNH page 0012 via Switchboard 0141 951 5000**

***\*Emergency Trauma Calls contact On Call Trauma Consultant\****

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S** | Date / time \* |  | Referring Consultant \* |  |
|  |  | Referring Doctor\* |  |
| Referring Hospital \* |  | Specialty\* |  |
| Hospital & Ward \* |  | Contact Phone \* |  |
| Patient Name \*CHI \* |  | Contact email\* |  |
| Contact Person\* out of hours if different from above |  |
| Age\* | yrs | Height | cm | Weight | Kg | BMI |  |
| Covid-19 Test Details |  |
| History of Presenting Complaint\* |
| **B** | Past Medical History \* | Current Medications\* |
| History of illicit drug use\* | Any know allergies\* |
|  |  |
| **A** | Detail CV support below\* | HR\* |  | Hb\* |  | Urea\* |  |
|  | BP\* |  | WCC\* |  | Creat\* |  |
|  | CVP |  | Plt\* |  | Bil |  |
|  | CI |  | PT |  | ALT |  |
|  | Lactate |  | PTT |  | ALP |  |
| Detail Respiratory support below | RR\* |  | Fib |  | Albumin |  |
|  | SpO2\* |  | H+/BE |  | CRP\* |  |
|  | pPeak |  | CXR\* |  |
| Renal eg RRT | UO\* |  |
| Micro | Temp\* |  | Other |  |
| Neuro | GCS\* |  |
|  | ECHO |
|  | CT Scan |
| **R** | Documentation of response and communication; to be completed by **Cardiothoracic Registrar On-Call (CROC)** Discuss the referral directly with the Consultant Cardiac Surgeon On Call with a management plan. |
| 1. Discuss, confirm and document the agreed clinical management plan with the referring clinician.
2. Email a copy of the completed electronic referral form with the agreed **clinical management plan** to the referring clinician and responsible Consultant from referring hospital / GP
3. Email a copy of the completed electronic referral form with the agreed clinical management plan to the responsible GJ **Consultant Cardiac Surgeon On Call (CSOC)**for their records.
4. Email a copy of the referral form with the agreed clinical management plan to Cardiac Scheduling for record capture – email - CardiacSchedulingTeam@gjnh.scot.nhs.uk

**Signed:** **GJ Cardiothoracic Registrar On-Call (CROC)****Contact mobile / email** |