Date

Dr Referrer

UR/Barcode

Practice name

00 Primary Street

Suburb 0000

**Referral added to Specialist Clinic waiting list**

Dear Dr [Name],

Re: **Name:** [Patient name]

**DOB:** [Date of birth]

**Address:** [Address]

 **Clinic:** [clinic ID]

 **Referral date:** [date]

We received a referral for your patient to attend the above clinic.

Based on the information provided, your patient has been assessed as requiring a routine appointment. The referral has been added to our waiting list. The current waiting time for this clinic is [XX] months.

We will contact you and your patient when an appointment becomes available.

Please contact [name] on [phone number] if there is further clinical information available or if there is a **clinically significant change in your patient’s condition** while waiting for this appointment.

Referral guidelines and other information about specialist clinics at [hospital name] are available on our website at [website].

Please see HealthPathways <http://melbourne.healthpathways.org.au> for other health services and/or further information about treatment options for your patient.

Yours sincerely,

[Name]
Manager

[Health Service] Specialist Clinics