

## **Spine Central Intake Q&A**

### **How do I refer patients for a spine surgical consultation?**

Beginning Monday March 4<sup>th</sup>, any spine consult referrals previously sent to the office of Dr. Marchuk, Dr. Haq, Dr. McCluskey, Dr. Marion or Dr. Puskas will be faxed to the Spine Central Intake at 1-844-497-2445 (same number as hip/knee and ISAEC)

### **How will referrals be triaged?**

Referrals will be triaged to the next available surgeon. As per the diagnosis, as this program evolves, the development of further subspecialty interests will as well, and patients will be referred to the most appropriate practitioner.

### **Can I refer to a specific surgeon?**

Patient's choice will be of top priority and primary care providers may request a specific care provider, however, this may result in increased time to consultation.

### **What if my patient has had previous spine surgery?**

With the new centralized intake, an option exists on the referral form that outlines if the patient has received previous spine surgery/assessment and/or if a second opinion is requested. In utilizing the central intake process as the primary option we hope to provide appropriate triage in a timely fashion. If however, any concerns or dissatisfaction regarding patient care exists despite this process, please do not hesitate to contact the initial surgeon to discuss in detail.

### **What is the difference between the Spine Program Central Intake and ISAEC Low Back Pain Program?**

The current combined centralized intake model does not include the initial assessment by the Advanced Practice Provider (APP). The ISAEC program will exist within the centralized intake. We will continue to provide assessment for all ISAEC referrals and the ISAEC referral form is still to be used for those patient sub-types within the comprehensive Spine Program. Non-ISAEC spine program referrals will by-pass the Assessment Centre and are routed direct to surgeon. If the surgeon reviews the referral and deems the patient does not require a spine surgical consult, the referral may be declined.

We expect the Spine Program will evolve to provide an Assessment component. The centralized intake will provide us with the necessary data to work towards the expansion of Spine with the assessment component. As this evolves we will continue to work with primary care givers to be able to provide necessary non operative strategies without reducing access to patients that are surgical candidates.

### **What are the Imaging requirements for Referral to the Spine Central Intake?**

For referrals to ISAEC, imaging is not recommended or required. For other spine central intake referrals, advanced imaging is at the primary care provider discretion. If patients have failed non-operative management and require consideration for surgery, you may send the referral with or without imaging. The spine central intake will route the referral to a surgeon. If that surgeon reviews the referral and wants to request imaging, they will contact your office.

