



DT9424

## ADULT PLASTIC SURGERY CONSULTATION

**Note: Refer to the clinical alerts on the back of the form and favor, if available, the protocols of the Accueil Clinique before filling it out.**

Patient's first and last name			
Health insurance number		Year	Month
		Expiry	
Parent's first and last name			
Area code	Phone number	Area code	Phone number (alt.)
Address			
Postal code			

Reason for consultation		Clinical priority scale: A: ≤ 3 days B: ≤ 10 days C: ≤ 28 days D: ≤ 3 months E: ≤ 12 months					
Hand and finger	<input type="checkbox"/> Carpal tunnel syndrome that does not respond to medical treatment after 2 months (orthotics <sup>1</sup> and infiltration)	<b>D</b>	Skin and soft tissue	<input type="checkbox"/> Benign mass (e.g. lipoma, sebaceous cyst, etc.) causing objectivable functional symptoms <i>(Prerequisite: imaging report revealing a mass larger than 5 cm)</i>	<b>E</b>		
	Trigger finger	<input type="checkbox"/> With permanent blocking <input type="checkbox"/> Without blocking or intermittent reducible blocking		<b>C</b> <b>D</b>	<input type="checkbox"/> Malignant cutaneous lesion with <b>confirmed pathology</b> (e.g. basal cell carcinoma, squamous cell carcinoma, melanoma, etc.) <i>(Prerequisite: pathology report)</i>	<b>B</b>	
	<input type="checkbox"/> Arthrosynovial cyst	<b>E</b>		<input type="checkbox"/> Benign cutaneous lesion <sup>2</sup>	<b>E</b>		
	Dupuytren's disease	<input type="checkbox"/> With loss of extension <input type="checkbox"/> Without loss of extension		<b>D</b> <b>E</b>	<input type="checkbox"/> Vicious scar to the face	<b>E</b>	
	<input type="checkbox"/> De Quervain's tendinitis that does not respond to medical treatment after 2 months (orthotics <sup>1</sup> and infiltration)	<b>D</b>		Breast	<input type="checkbox"/> Breast reduction	<b>E</b>	
	<input type="checkbox"/> Invalidating rhizarthrosis that does not respond to medical treatment after 2 months (orthotics <sup>1</sup> and infiltration) <i>(Prerequisite: hand x-ray)</i>	<b>D</b>			<input type="checkbox"/> Breast asymmetry	<b>E</b>	
	<input type="checkbox"/> Acute non-displaced fracture of the hand (see clinical alerts on reverse side) <i>(Prerequisite: x-rays, adequate immobilisation)</i>	<b>B</b>		Others	<input type="checkbox"/> Breast reconstruction post breast cancer	<b>E</b>	
	<input type="checkbox"/> Mallet finger <i>(Prerequisite: x-rays, adequate immobilisation)</i>	<b>B</b>			<input type="checkbox"/> Gynecomastia <i>(Prerequisite: medical imaging, endocrinology workup)</i>	<b>E</b>	
	<input type="checkbox"/> Reduced finger dislocation (see clinical alerts on reverse side) <i>(Prerequisite: post-reduction x-ray)</i>	<b>B</b>			<input type="checkbox"/> Acute non-displaced fracture of the carpus including the scaphoid (see clinical alerts on reverse side) <i>(Prerequisite: x-rays of wrist including scaphoid view, adequate immobilisation)</i>	<b>B</b>	
	<input type="checkbox"/> Other reason for consultation or clinical priority modification <b>(MANDATORY justification in the next section):</b>				Chronic and complex wounds: Refer to wound clinic of your region		
				<input type="checkbox"/> Burns that do not fit Burn Center transfer criteria <sup>3</sup>	<b>B</b>		
					Clinical priority		
<b>Suspected diagnosis and clinical information (mandatory)</b>				<b>If prerequisite is needed :</b>			
				<input type="checkbox"/> Available in the QHR <input type="checkbox"/> Attached to this form <input type="checkbox"/> Adequate immobilisation			
<b>Special needs:</b>							
<b>Referring physician identification and point of service</b>				<b>Stamp</b>			
Referring physician's name			Licence no.				
Area code Phone no.		Extension	Area code Fax no.				
Name of point of service							
<b>Signature</b>						Date (year, month, day)	
<b>Family physician:</b> <input type="checkbox"/> Same as referring physician <input type="checkbox"/> Patient with no family physician				<b>Registered referral (if required)</b>			
Family physician's name				If you would like a referral for a particular physician or point of service			
Name of point of service							

## Legend

<sup>1</sup> Information on prescription of orthotics: <http://orthèse:http://www.ramq.gouv.qc.ca/fr/citoyens/programmes-aide/appareils-suppleant-deficience-physique/Pages/appareils-suppleant-deficience-physique.aspx>

<sup>2</sup> The excision of certain lesions or benign masses is not always an insurable service by the RAMQ (e.g. skin tag, lipoma, seborrheic keratosis, etc.) and could be to the users charge. Thank you for letting the user know.

<sup>3</sup> Web link for Burn Center transfer criteria

[http://fecst.inesss.qc.ca/fileadmin/documents/Publications/VBG\\_criteres\\_transfert\\_vers\\_centre\\_expertise.pdf](http://fecst.inesss.qc.ca/fileadmin/documents/Publications/VBG_criteres_transfert_vers_centre_expertise.pdf)

### For the following reasons, communicate with plasticien on call in your area:

- Uncomplicated closed finger laceration with tendinous and/or nerve laceration but without vascular compromise
- Finger or hand laceration with loss of substance > 1 cm<sup>2</sup> of soft tissues or exposed structures (see also clinical alerts)

### Clinical alerts (non-exhaustive list)

#### Refer the patient to the Emergency-department

- |  |   |
|--|---|
| <ul style="list-style-type: none"><li>• Displaced or open fracture or immobilisation impossible (carpus, metacarpal, phalangeal fractures)</li><li>• Digital vascular compromise</li><li>• Septic arthritis or infectious tenosynovitis</li><li>• Non reducible finger dislocation</li><li>• Digital amputation</li><li>• Laceration with extensive loss of soft tissues (e.g. finger degloving, dorsal hand degloving) or very contaminated wound</li></ul> | <ul style="list-style-type: none"><li>• Maxillo-facial fracture (nose, mandible, maxilla, orbit)</li><li>• Acute burn that fits Burn Center criteria<sup>4</sup></li><li>• Compartment syndrome</li><li>• Complex laceration that is difficult to close</li></ul> |
|--|---|

#### Important additional information

- ❖ Vicious scar other than located in the face and aesthetics cases are not covered by the RAMQ and should be directed to esthetic surgery centers and not the CRDS.