Self-Referral to Musculoskeletal Physiotherapy Self-referral is available for adults over 16 who are suffering from low back pain, neck pain, who have

Self-referral is available for adults over 16 who are suffering from low back pain, neck pain, who have recent injuries such as strains and sprains or joint and muscle pain. If you are under the care of a consultant or have other conditions you should consult your GP.

First Name:*	Today's Date:*	How long have you had this problem? (Please tick)*
Last Name:*	Date of Birth:*	0 - 4 Weeks 5 - 12 Weeks 3 - 11 Months >1 Year
Health and Care Number: (<i>if known</i>):	Your GP's Name:*	Have you been to see your GP and/or your Consultant about this problem?* Yes No
Your Address:*	Your GP Surgery:*	Has your doctor suggested you self-refer to Physiotherapy? * Yes I No I
Postcode:		Have been to see a Physiotherapist about this problem?* Yes No
Your E-mail:		Is the problem?*
Telephone Numbers Please ensure you enter a number where you can be contacted for more information if required. Please tick preferred telephone number and most suitable time to be contacted (Monday - Friday). Home:* 10.00am - 2.00pm Work:* 2.00pm - 4.00pm Mobile:* Other		Return of an old problem Are your symptoms getting worse?* Yes No
		Are you able to carry out your normal activities?* Yes No
Can we leave a message at this number? Yes 🗌 No 🗌		Are you off work because of this problem?* Yes No Not applicable
Do you require an interpreter?* Yes 🗌 No 🔲		If Yes, how long?
If yes, which language?		1-3 days 🔲 Up to 7 days 🛄 8 days or more 🛄
Do you require adjustment for reasons related to a disability?* Yes I No I If Yes, please give details:		Are you unable to care for a dependant because of this problem?*
		Yes 🗌 No 🗌 Not applicable 🗌

Where is your main problem? (Please tick)*			
Back I Neck I Shoulder I Arm I Elbow I Wrist I Hand I Chest I Hip I Knee I Leg I Foot I			
Do you know what caused your problem?*			
Yes 🔲 No 🗌 If yes please give details:			
Have you had any unexpected recent weight loss?*			
Yes 🔲 No 🗍 If yes please give details:			
Since the onset of your problem do you have any of the following symptoms?			
(Please tick all that apply)*			
Any difficulties passing or controlling urine? Yes 🗌 No 🗌			
Muscle weakness? Yes No			
Numbness / Tingling / 'Pins and Needles'? Yes 🗌 No 🔲			
Please give details:			
Please tick where you wish to attend for assessment:*			
Ards Community Hospital 🔲 Bangor Community Hospital 🗌 Downe Hospital 🔲			
Lagan Valley Hospital 🔲 Lisburn Health Centre 🗌 Stewartstown Road Clinic 🗌 Saintfield 🖵			
I agree that the information that I have provided in this form is accurate.*			
Signature:			
Please ensure all fields marked with * are completed or we will be unable to process the referral. On completion please return to: Central Booking Office, 1st Floor, Main Building, Downshire Hospital, Ardglass Road, Downpatrick, Co. Down, BT30 6RL			

How can I self-refer?

There are 3 ways you can self refer:

 Online Form – A form can be completed online and submitted at the following website: www.setrust.hscni.net/services/physioform.htm



 Downloadable form – A paper copy of the form can be printed off and completed and posted to the Central Booking Office or email: ahp.centralbookingoffice@setrust.hscni.net



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Paper form – A copy of the form can be picked up at GP's and Physiotherapy Departments, South Eastern HSC Trust and can be completed and sent to the Central Booking Office.



For further information on this service contact:

The South Eastern HSC Trust Website - Physiotherapy http://www.setrust.hscni.net

Send your completed Self-Referral form to:

Central Booking Office 1st floor Main Building Downshire Estate Ardglass Road Downpatrick BT30 6RL

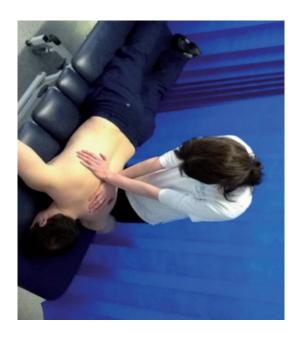


Self-referral to Musculoskeletal Physiotherapy

Information Leaflet



You can now choose to refer yourself directly to your local HSC / Trust Physiotherapist



What is self-referral?

Self-referral is a direct route to physiotherapy for those who live within the South Eastern HSC Trust. It allows you to refer yourself to physiotherapy for assessment and treatment when you require it.

Can I self-refer?

If you are over 16 and are suffering from low back pain, neck pain, recent injuries such as strains and sprains or joint or muscular pain, self-referral physiotherapy is for you.

You should consult your GP if you are under 16, under the care of a consultant or if you require physiotherapy for a neurological, respiratory, obstetric or gynaecological condition.

What happens once I send in my referral form?

Your form will be reviewed by a senior physiotherapist.

If your condition is assessed as urgent, you will be contacted by telephone to agree an appointment.

If your condition is assessed as less urgent you will be contacted by letter inviting you to telephone to make an appointment at a date and time that suits you.

How will I benefit?

You can benefit from self-referral in the following ways

- It is a direct route to advice and intervention when you most need it
- It gives you the opportunity to consult with a specialist musculoskeletal physiotherapist to help you manage your condition.

If you are unsure of the process please consult your GP.

What should I wear?

Please wear comfortable shoes or trainers and bring appropriate clothing such as shorts or a vest-top or T-Shirt so that your condition can be properly assessed by your physiotherapist.

Failure to attend

If you do not attend the appointment you have agreed and fail to contact us within 24 hours you will be discharged from the service.

The outcome of all physiotherapy assessments and treatments will be forwarded to your GP.