|  |  |
| --- | --- |
| **Clinical specialty** |  |
| **Urgency for publication and rationale** |  |
| **Title of CPC**(less than 90 characters) |  |
| **Adult/Paediatric/Both** |  Choose an item. |
| **Emergency criteria** |  |
| **Exclusions** (conditions you don’t accept/don’t meet threshold for assessment) |  |
| **Category 1** (appointment clinically indicated in less than 30 days) |  |
| **Category 2** (appointment clinically indicated in less than 90 days) |  |
| **Category 3** (appointment clinically indicated in less than 365 days) |  |
| **Useful information for referring clinicians**  | [provide relevant clinical management information as needed] |
| **Supporting evidence** | [provide website links to articles/clinical guideline links and consumer information links for project team] |
| **Key words (search)** |  |
| **Other CPC that may be impacted** | [List other CPC affected by this change e.g. condition managed by multiple specialties] |
| **Names of people consulted/location/role** |  |
| **Other services throughout metro LHNs** | **NALHN:** **CALHN:** **SALHN: WCHN:**Modbury [ ]  RAH [ ]  FMC [ ]  WCH [ ] LMH [ ]  TQEH [ ]  Noarlunga [ ]  |
| **Submitted by:****Name:****Email:****Phone number:** |     |
| **Date submitted**  | Click or tap to enter a date. |

Please submit this to the CPC Project team via email health.cpc@sa.gov.au