

Specialist outpatient service

Clinical urgency categories

Below are the three endorsed standard clinical urgency categories for the triage of specialist outpatient referrals.

In order for a patient to be allocated a particular clinical urgency category, the patient must meet all criteria for that category. If a patient does not fulfil all of the criteria for Category 1, then Category 2 must be considered. If the patient does not fulfil all of the criteria for Category 2, then the patient must be allocated Category 3 status.

Category 1: Appointment clinically indicated within 30 days	Category 2: Appointment clinically indicated within 90 days	Category 3: Appointment clinically indicated greater than 90 days
<p>The patients clinical condition will:</p> <ul style="list-style-type: none">• Require more complex or emergency care if assessment is delayed; and• Have a significant impact on quality of life if access is delayed beyond 30 days.	<p>The patients clinical condition has the potential to:</p> <ul style="list-style-type: none">• Require more complex care if assessment is delayed; and• Have some impact on quality of life if care is delayed beyond 90 days	<p>The patients clinical condition is unlikely to:</p> <ul style="list-style-type: none">• Deteriorate quickly• Require more complex care if assessment is beyond 90 days

Rapid Access Appointment (immediate - within 72 hours)

For patients requiring immediate access to an outpatient clinic (within 72 hours of referral), the Rapid Access Appointment can be used to facilitate access.

Rapid Access Appointments do not form a component of a specialist outpatient service waiting list, but are established as a type of appointment to aide immediate access to specialist outpatient services for those patients that are not appropriate to be wait-listed. Responsibility for the assignment of Rapid Access Appointments is with the SA Health outpatient service clinician.

The type of patients that may be appropriate for allocation of a Rapid Access Appointment include clinically appropriate patients diverted from public hospital Emergency Departments, as well as patients referred by general practitioners with a clearly demonstrated urgent need for specialist assessment and commencement of care.

Assessment and care facilitated via a Rapid Access Appointment may avoid the need for a future presentation to an Emergency Department or a hospital inpatient admission.

[Government of South Australia 2016, Specialist Outpatient Services Clinical Urgency Category Policy Directive, Department of health and aging, vol 1, pp 4-5.](#)

For more information

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