

CHRONIC DISEASE

SERVICE	REFERRAL INFORMATION		
MUNGULLI WELLNESS CLINIC Mungulli Wellness Brochure Link	Eligibility		
<p>A culturally safe chronic disease assessment and management clinic for community members with early signs, symptoms and/or a diagnosis of</p> <ul style="list-style-type: none"> Respiratory disease Chronic kidney disease or Type 2 diabetes/pre- diabetes <p>and related chronic conditions.</p> <p>Enquiries:</p> <p>Please call 1300 668 936</p>	<p>Patient identifies as being of Aboriginal and/or Torres Strait Islander descent and aged 16 years and older.</p>		
	Pre-Requisite Tests		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> <p>Chronic Asthma/Chest Infections Pre and post SABA Spirometry</p> <p>COPD Spirometry Electrocardiogram (ECG) within last 3 months Bloods within last 3 months Chest X-Ray or CT Chest if available</p> <p>Type 2 Diabetes/Pre-diabetes Serial HbA1c Fasting Blood Glucose/OGTT Full Lipid Profile TG, HDL, LDL A random urine albumin: creatinine ratio eGFR, FBE, LFTs, U& Es</p> </td> <td style="width: 50%; padding: 5px;"> <p>Eye Screening Report – Optometrist (Optional)</p> <p>CHRONIC KIDNEY DISEASE Serial blood pressure readings Ultrasound of kidneys</p> <p>Pathology tests: eGFR (serial measures where available) Urea Creatinine Electrolytes Full Blood Count Urine microscopy Urine albumin or protein creatinine ratio (serial values if available)</p> </td> </tr> </table>	<p>Chronic Asthma/Chest Infections Pre and post SABA Spirometry</p> <p>COPD Spirometry Electrocardiogram (ECG) within last 3 months Bloods within last 3 months Chest X-Ray or CT Chest if available</p> <p>Type 2 Diabetes/Pre-diabetes Serial HbA1c Fasting Blood Glucose/OGTT Full Lipid Profile TG, HDL, LDL A random urine albumin: creatinine ratio eGFR, FBE, LFTs, U& Es</p>	<p>Eye Screening Report – Optometrist (Optional)</p> <p>CHRONIC KIDNEY DISEASE Serial blood pressure readings Ultrasound of kidneys</p> <p>Pathology tests: eGFR (serial measures where available) Urea Creatinine Electrolytes Full Blood Count Urine microscopy Urine albumin or protein creatinine ratio (serial values if available)</p>
<p>Chronic Asthma/Chest Infections Pre and post SABA Spirometry</p> <p>COPD Spirometry Electrocardiogram (ECG) within last 3 months Bloods within last 3 months Chest X-Ray or CT Chest if available</p> <p>Type 2 Diabetes/Pre-diabetes Serial HbA1c Fasting Blood Glucose/OGTT Full Lipid Profile TG, HDL, LDL A random urine albumin: creatinine ratio eGFR, FBE, LFTs, U& Es</p>	<p>Eye Screening Report – Optometrist (Optional)</p> <p>CHRONIC KIDNEY DISEASE Serial blood pressure readings Ultrasound of kidneys</p> <p>Pathology tests: eGFR (serial measures where available) Urea Creatinine Electrolytes Full Blood Count Urine microscopy Urine albumin or protein creatinine ratio (serial values if available)</p>		
	Specific considerations for referral (please indicate on referral)		
	<p>Is a Team Care Arrangement requested?</p> <p>Had this patient been referred for Close the Gap medication assistance?</p> <p>Is this patient newly diagnosed? Do you consider this person's care needs are</p> <ul style="list-style-type: none"> Low risk : needs likely to be met in group education Complex care: has significant co-morbidity or barriers to health outcomes that requires full medical and multi-disciplinary assessment and treatment planning 		
<p>Link to Printable Referral Template Link to Download Referral Template</p>	<p>Do you have any concern regarding this patient participating in</p> <ul style="list-style-type: none"> General community physical activity programs A graded exercise program under the guidance of a Physiotherapist or Exercise Physiologist <p>Does this patient have co morbidities that restrict what exercise can be encouraged during group or individual education? <contraindications to exercise></p>		