

Plastic Surgery

Introduction

General Comments and Directions

- Scoring should be based on the considered view of the clinician taking into account the patient's history, examination, results of investigations and the clinician's experience in treating like patients.
- Criteria only apply for patients where a procedure is indicated and the patient wishes it and all non-surgical therapeutic options have been explored.
- These criteria only apply to elective and arranged admissions.
- The score should be calculated during the consultation, and the patient informed whether they will be accepted for publicly funded treatment. This may occur during the first or follow-up consultation, after investigations have assisted with establishing a diagnosis (e.g. CT scans).
- If due to exceptional factors not included in the prioritisation criteria, the booking status generated does not adequately reflect the patient's priority, the booking status may be overridden. The reason for the exception must be documented.

More than one procedure

Where two or more related but independent procedures are contemplated at the same operating session the score should relate to the most significant procedure.

Staged Procedures

A treatment procedure may be staged over several months or years. For the purpose of the priority access scoring a related series of treatments should be considered as one event. Repeat scoring is not required.

This tool does not cover:

- Hand and upper limb conditions – use the Plastics Hand and Upper Limb tool
- Skin lesions – use the Skin Lesion tool.

Automatic Priority

An appropriate priority score reflecting the clinically appropriate timeframe for treatment will be automatically assigned for the following cases.

- Non-cutaneous malignancy (e.g. head and neck, sarcoma)
- Lymph node dissection for malignancy

The following paediatric conditions should be managed as *planned*, with a plan of care related to any milestones required prior to listing for surgery, with a priority score of 95, and a prospective operating date entered in the patient management system.

- Paediatric – Primary cleft lip / palate
 - Paediatric – Primary congenital craniofacial
 - Paediatric – Primary ear reconstruction
 - Paediatric – Primary hypospadias
 - Paediatric – Primary congenital chest defects
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- Not a special case

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Impact on Life

Warning: please proceed with this prioritisation event only if you have a completed Impact-on-Life Self-Assessment form from the patient.

Impact of the condition on ability to engage in and enjoy activities which are important to the individual patient.

Please transcribe information from the questionnaire completed by the patient.

This scale ranges from 1: *No difficulty* to 6: *Extremely difficult*.

Social Interaction



Personal Interaction



Ability to fulfil your responsibilities to others



Personal Care



Personal Safety



Leisure Activities



How much does the condition affect the patient?

Surgeon evaluation of the impact of the condition on the patient's life.

Activities of Daily Living (ADL) are routine activities that people tend to do every day without needing assistance. There are six basic ADLs: eating, bathing, dressing, toileting, transferring (walking) and continence.

- Patient has little or no difficulty and/or little functional compromise
- Patient has some difficulty and/or some functional compromise
- Patient has quite a lot of difficulty and/or quite a lot of functional compromise
- Patient finds it very difficult and/or some functional compromise to ADL
- Patient finds it extremely difficult and has significant functional compromise to ADL

What is the likelihood of significant deterioration of the condition and its impacts in the next 12 months?

Deterioration reflects the components of likelihood and consequence for each individual patient.

This should reflect both the natural history of the condition and the patient's history.

- None
- Low (<25%)
- Medium (25-75%)
- High (>75%)

What would be the consequence of deterioration in the next 12 months?

i.e. increased/additional symptoms, further compromise of function.

- None (change would have no impact on the patient)
- Small (change would have little impact on the patient)
- Moderate (change would have significant impact on the patient)
- Great (change would have a severe impact on the patient)

What is the degree of improvement on impact on life expected from the operation?

- Small
- Moderate
- Large
- Great

How much will a delay in treatment reduce the ability of this patient to benefit from surgery?

Potential effect on outcome if surgery delayed more than 4 months.

- None
- A little
- Moderately
- Significantly
- Completely

