



**Queensland
Government**

**Mental Health and Addiction Service
Eating Disorders Service - Sunshine Coast
Referral Form**

(Affix patient identification label here)

URN:

Family Name:

Given Names:

Address:

Date of Birth:

Sex: M F I

Referral for:

- Dr. Hsin-Yi (Amy) Mao, Eating Disorders Service
Psychiatrist (*bulk billing assessment clinic*)
- Eating Disorders Service Assessment Clinic

Patient does not require immediate admission as
per Queensland Eating Disorder Service Guidelines
(refer to page 2 or Queensland Eating Disorder
Service (QuEDS) website)

Client details

Home phone: Work phone: Mobile:

Medicare No.: Expiry:

Initial risk assessment

- Suicide thoughts / intent / plan Yes No **If Yes, consider QAS**
- Self-harming Yes No If Yes, type:

Medical assessment

Height (M): Weight (kg): BMI:

Weight loss How much? Time frame:

Physical complications

- Fainting Dizziness Chest pain Dehydration Other (specify):
- BP - Lying: Standing (after 2 mins): Temp:
- HR - Lying: Standing (after 2 mins):

Bloods taken Date: **N.B. Blood results < 2 weeks old must be included with referral form**

(FBC, E/LFTs, Mg) Lab:

Medical history and medications:

Eating disorder behaviours

- Oral restriction Vomiting Bingeing Exercise Diuretics Laxatives
- Past psychiatric history: Yes No Drug and alcohol issues: Yes No
- If "Yes" to either question, provide details below; or other behaviour:

Is patient aware of referral: Yes No Does patient agree? Yes No

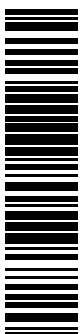
GP's name: Date: .. / .. / ..

Phone no: Fax No:

Referring Doctor signature: Provider No:

*When completed fax referral form to fax number 07 5202 9501
Enquiries should be directed to 07 5202 9500*

DO NOT WRITE IN THIS BINDING MARGIN



GENERAL PRACTITIONER GUIDELINES FOR THE TREATMENT OF A CONSUMER WITH AN EATING DISORDER

Continue at least **weekly** medical monitoring of the following parameters, with any abnormalities addressed as per the statewide guidelines below:

- Physical obs (including postural BP and HR 2 minutes apart);
- BGL
- Bloods (FBC, E/LFTs, Mg)
- ECG
- Weight and BMI

If under the care of a Community Mental Health team please fax through physical observations, weight and blood results to the community team after review.

Taken from **“A guide to admission and inpatient treatment”** by the Queensland Eating Disorder Service

	<i>Psychiatric admission indicated #</i>	<i>Medical admission indicated ##</i>
	(bold parameters highlight adolescent criteria that are different to those for adults)	
Weight loss	Rapid weight loss (i.e. 1kg/wk over several weeks) or grossly inadequate nutritional intake (<1000kCal daily)	
Re-feeding risk	Low	High
Systolic BP	<90 mmHg (<80 mmHg)	<80 mmHg (<70 mmHg)
Postural BP		>20 mmHg drop with standing
Heart rate		≤40 bpm (<50 bpm) or > 120 bpm or postural tachycardia > 20bpm
Temp	<36.0	<35.5 or >38°C
12 lead ECG	Normal sinus rhythm	Any arrhythmia including QTc prolongation, or non-specific ST or T-wave changes including inversion or biphasic waves
Blood sugar		<3.0 mmol/L
Sodium	<130 mmol/L*	<125 mmol/L
Potassium	Below normal range	<3.0 mmol/L
Magnesium		Below normal range
Phosphate		Below normal range
eGFR	>60 ml/min/1.73m ² and stable	<60 ml/min/1.73m ² or rapidly dropping (25% drop within a week)
Albumin	Below normal range	<30 g/L
Liver enzymes	Mildly elevated	Markedly elevated (AST or ALT >500)
Neutrophils	<1.0 x 10 ⁹ /L	<0.7 x 10 ⁹ /L
Weight	Body Mass Index (BMI) 12-14 (75-85% IBW, see IBW Ready Reckoner)	BMI <12 (<75% IBW, see IBW Ready Reckoner)
Other	Not responding to outpatient treatment	

**Please note, any biochemical abnormality which has not responded to adequate replacement within the first 24 hours of admission should be reviewed by a Medical Registrar urgently.*

If any parameter is met at the time of assessment, inpatient treatment is advised. The list in the table is not exhaustive; therefore any other medical problems which are of concern should be discussed with the relevant medical team.

Psychiatric admission is indicated if BMI <14 for adults or 75-85% IBW for adolescents, or there are other abnormalities of physical parameters that are not of sufficient severity to warrant medical admission.

In some cases, as indicated in the column of indicators under the ‘Medical admission’ heading, an initial medical admission is indicated. Generally speaking, this is recommended if BMI <12 for adults or weight is <75% IBW for adolescents, or there are significant abnormalities of physical parameters.

Admission should be facilitated as per below:

1. Letter explaining concerns and outlining physical obs/bloods;
2. Send letter with patient, or consider direct fax to the Emergency Department if letter contains information that may cause distress to patient;
3. Consider use of the Mental Health Act as per the Queensland Eating Disorder Service *“A Guide to Using the Mental Health Act 2016 for Patients with an Eating Disorder”*.