


Appendix 1. (A) Victorian pop-up window in a general practice electronic medical record to record a child's referral status post general practitioner consultation. (B) New South Wales pop-up window in a general practice electronic medical record to record a child's referral status post general practitioner consultation.

A

Strengthening Care 4 Children



STRENGTHENING CARE FOR CHILDREN

Please indicate below where you have referred

CHILD NAME


Tick all that apply

<input type="checkbox"/> No referral	<input type="checkbox"/> Sunshine Hospital - Emergency Department
<input type="checkbox"/> Austin Hospital - Emergency Department	<input type="checkbox"/> Sunshine Hospital - Outpatient
<input type="checkbox"/> Austin Hospital - Outpatient	<input type="checkbox"/> Wembee Hospital - Emergency Department
<input type="checkbox"/> Northern Hospital - Emergency Department	<input type="checkbox"/> Wembee Hospital - Outpatient
<input type="checkbox"/> Northern Hospital - Outpatient	<input type="checkbox"/> Public Mental Health Services (e.g. CAMHS, Headspace, Orygen)
<input type="checkbox"/> Private Paediatrician (General or Subspecialty)	<input type="checkbox"/> Other Allied Health
<input type="checkbox"/> Private Psychologist	<input type="checkbox"/> Other Private Hospital - Emergency Department
<input type="checkbox"/> Private Surgeon	<input type="checkbox"/> Other Private Hospital - Outpatient
<input type="checkbox"/> Royal Children's Hospital - Emergency Department	<input type="checkbox"/> Other Public Hospital - Emergency Department
<input type="checkbox"/> Royal Children's Hospital - Outpatient	<input type="checkbox"/> Other Public Hospital - Outpatient
<input type="checkbox"/> SC4C Paediatrician	<input type="checkbox"/> Other
<input type="checkbox"/> Speech Pathologist	

Save

B

Strengthening Care 4 Children



STRENGTHENING CARE FOR CHILDREN

Please indicate below where you have referred

CHILD NAME

Tick all that apply

<input type="checkbox"/> No referral	<input type="checkbox"/> Private Paediatrician (General or Subspecialty)
<input type="checkbox"/> Sydney Children's Hospital - Emergency Department	<input type="checkbox"/> Private Psychologist
<input type="checkbox"/> Sydney Children's Hospital - Outpatient	<input type="checkbox"/> Private Surgeon
<input type="checkbox"/> Royal Prince Alfred - Emergency Department	<input type="checkbox"/> Other private hospital - Emergency Department
<input type="checkbox"/> Royal Prince Alfred - Outpatient	<input type="checkbox"/> Other private hospital - Outpatient
<input type="checkbox"/> The Children's Hospital Westmead - Emergency Department	<input type="checkbox"/> Public Mental Health Services (CAMHS/Headspace)
<input type="checkbox"/> The Children's Hospital Westmead - Outpatient	<input type="checkbox"/> Speech Pathologist
<input type="checkbox"/> The Sutherland Hospital - Emergency Department	<input type="checkbox"/> Other Allied Health
<input type="checkbox"/> The Sutherland Hospital - Outpatient	<input type="checkbox"/> Sleep/feeding support (e.g. Tresilian/Karitane)
<input type="checkbox"/> Other public hospital - Emergency Department	<input type="checkbox"/> Other
<input type="checkbox"/> Other public hospital - Outpatient	
<input type="checkbox"/> SC4C Paediatrician	

Save