

**NUTRITION AND DIETETIC SERVICE**  
 Swansea and Neath Port Talbot Hospitals

**OUTPATIENT REFERRAL CRITERIA AND TRIAGE GUIDANCE – ADULTS**

The following patients can be referred to the Nutrition and Dietetics Service using the department's outpatient referral form. Referrals are accepted from all qualified Health Care Professionals. If we do not have enough information we will return the referral, which may result in a delay for the patient. All referrals should include relevant and detailed information. Prioritisation is based on clinical need, including referrals for domiciliary visits and ward discharges.

**Enterally tube fed patients – Enquiry by telephone first is recommended according to area of patient residence. Swansea-Singleton Hospital 01792 285342, Neath Port Talbot Hospital 01639 862068.**

**Urgent- to be seen within 4 weeks**

- **Nutritionally compromised patients** - (e.g. unintentional weight loss BMI <18.5, pre/post op nutrition support, increased nutritional requirements, dysphagia, cachexia, weight loss secondary to new diagnosis of coeliac disease)
- **Post-operative gastrointestinal surgery patients** (oesophagectomy, gastrectomy, bowel surgery) experiencing weight loss and/or diet related gastrointestinal symptoms
- **Gastro- Intestinal Disorders resulting in weight loss**
- **Acute inflammatory bowel disorders** – active Crohn's disease, active ulcerative colitis, high output stoma
- **Newly diagnosed Type 1 Diabetes**
- **Renal Disease** – patients requiring dietary modification such as potassium, phosphate, low sodium, fluid, nutrition support.
- **Liver Disease** – patients requiring dietary modification such as sodium, fluid, nutrition support.
- **Gestational diabetes**

**Routine – to be seen within 13 weeks**

- **Diabetes**
  - Newly diagnosed Type 2 Diabetes.
  - Poor control – HbA1c 59mmol/mol (7.5%) or above and **patient is motivated to change.**
  - Type 2 diabetes prior to insulin conversion
  - Diabetes with modifiable cardiovascular risk factors e.g. dyslipidaemia, obesity, BMI>28.
  - Diabetes with other therapeutic dietary needs e.g. Coeliac disease, significant weight loss.
  - Impaired Glucose Tolerance.
  - Self identified – patients requesting advice.

- **Overweight / Obesity**
  - **BMI >30 patients should be motivated to make lifestyle/dietary changes.**
  - **BMI >28** plus 1 x co-morbidity e.g. hypertension, DM, MI, hyperlipidaemia.
  - **South Asian BMI > 25** plus 1 x co-morbidity e.g. hypertension, DM, MI, hyperlipidaemia.
  
- **Gastrointestinal Disorders**
  - **Irritable Bowel Syndrome**
  - **Newly diagnosed Coeliac Disease** – as criteria in NICE guidelines or those with existing coeliac disease with raised TTG levels
  - **Chronic pancreatitis or those who have previously undergone pancreatic surgery** (such as PPPD, Whipples) presenting with symptoms suggesting of pancreatic exocrine insufficiency e.g. diarrhoea, steatorrhoea, pale stools, wind, bloating,
  
- **Food Allergies** – patients with a formal diagnosis of food allergy. Please be aware that we are not qualified to interpret RAST test results or serological blood tests. Please enclose a list of foods which the patient must exclude from their diet
  
- **Coronary Heart Disease** – it is no longer good practice to prioritise patients on raised cholesterol alone. Please refer on basis of :-
  - **Primary Prevention** BMI of 30 and above, or with a high CVD risk prediction in accordance with NICE Clinical Guidance 181 (2014)
  - **Secondary Prevention** CHD exists and patient is having difficulty following dietary advice provided by another health professional.

**Other Clinical Conditions-please contact the department to discuss prior to sending referral**

**Please note we do not accept referrals for people with complex mental health disorders such as Eating Disorders. Further advice can be obtained from the Mental Health and Learning Disability Dietetic Service based in Glanrhyd Hospital, Bridgend on 01656 757111**