

Bankmed GP to Specialist Referral Form

Who we are

Bankmed (referred to as 'the Scheme'), registration number 1279, is a non-profit organisation, registered with the Council for Medical Schemes. Discovery Health (Pty) Ltd (referred to as 'the administrator') is a separate company and an authorised financial services provider (registration number 1997/013480/07) which takes care of the administration of your membership for the Scheme.

Only complete this form for planned or elective referrals to a specialist. There is no need to complete this form for referral to an ophthalmologist, a specialist for maternity care, a psychiatrist or to a dental specialist and maxillo-facial and oral surgeon.

Refer to the second page for information about specialist referrals in an emergency/urgent referral or when it is an elective or planned referral.

How to complete this form

1. Please use one letter per block, complete in black ink and print clearly.
2. Please sign section 3
3. Attach all relevant test results to avoid any administrative delays
4. Please e-mail the completed form to specialistauth@bankmed.co.za or fax to 021 527 1912

Is this referral at a patient or parent/guardian's request?

Yes No

If "Yes", please obtain the patient or parent/guardian's signature

Is this referral a GP requesting clinical advice from a specialist to manage the patient's condition and treatment?

Yes No

1. Patient's details

Title	<input style="width: 100%;" type="text"/>
Name	<input style="width: 100%;" type="text"/>
Surname	<input style="width: 100%;" type="text"/>
Identity number	<input style="width: 100%;" type="text"/>
Membership number	<input style="width: 100%;" type="text"/>
E-mail	<input style="width: 100%;" type="text"/>
Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Cellphone	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

How does the member want to receive the feedback from the Clinical Advisory Panel?

E-mail Fax SMS

Complete contact details for the field you selected above

Referring GP details

Practice number	<input style="width: 100%;" type="text"/>	Treating Healthcare Professional	<input style="width: 100%;" type="text"/>
Telephone (w)	<input style="width: 100%;" type="text"/>	(when a specialist needs to contact you)	
Cellphone	<input style="width: 100%;" type="text"/>	(when a specialist needs to contact you)	

How do you want to receive the feedback from the Clinical Advisory Panel?

E-mail Fax SMS

Complete contact details for the field you selected above

2. Specialist referral and advice

Date of GP consultation	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Specialist discipline	<input style="width: 100%;" type="text"/>
Specialist practice number*	<input style="width: 100%;" type="text"/>	Initial date of diagnosis	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Reason for referral

ICD-10 codes 1. [][][][] . [][][] 2. [][][][] . [][][] 3. [][][][] [][][] 4. [][][][] . [][][]

Co-morbidities

Detailed clinical history

Previous treatment and investigation**

Current management

Referring Healthcare Professional's signature

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* For a list of specialists on the Bankmed Specialist Network list, go to www.bankmed.co.za

** NB PLEASE ATTACH THE RELEVANT TEST RESULTS.

Bankmed GP to Specialist Referral Process: How Does it Work?

Emergency specialist referral (24 hours from GP visit)	→ Refer the member to a casualty unit at a Bankmed network hospital for emergency or urgent treatment No authorisation is needed This form does not need to be completed	
For urgent referrals (member needs to see the specialist for a medical condition within 48 hours from seeing the GP)	→ Obtain an urgent specialist authorisation from the Bankmed contact centre by calling 0800 226 5633 Authorisation will be given if the case meets the requirements for an urgent referral	
Planned/elective specialist referral (member needs to see the specialist for a medical condition but not within 48 hours from seeing the GP)	→ GP must complete the GP to Specialist form. Please e-mail the completed form to specialistauth@bankmed.co.za or fax to 021 527 1912 for review and attach any test results or motivations NOTE: Bankmed GPs that make use of HealthID can submit GP to specialist referral requests via the HealthID functionality on the Health Professional Zone	→ Bankmed will review the request and approve, decline or advise on the outcome

All requests for specialist referral will be reviewed by a Clinical Advisory. Confirmation of the Clinical Advisory Panel's decision will be provided within two working days.