Oral Surgery Electronic Referral Portal User Guide

Applications & Clinical Systems

Gloucestershire Hospitals NHS Foundation Trust Gloucester GL1 3NN

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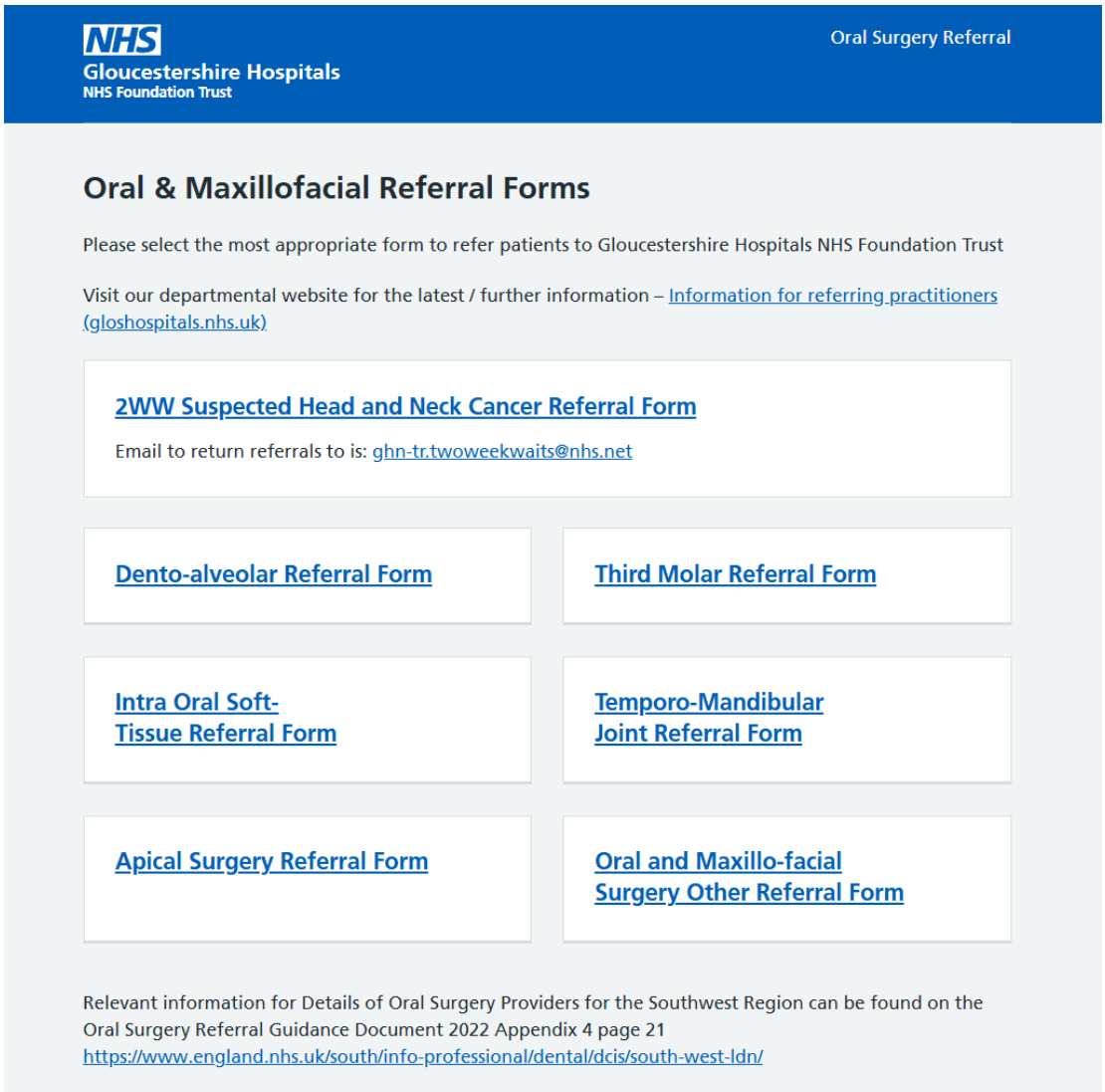
Introduction

The Oral Surgery Electronic Referral Portal are a series of web forms available to external dental surgeries. When referring a patient for any surgery, the dentist will complete the appropriate webform, attaching any Xray documents as required. This data will be saved as a PDF document and sent via email to an email account managed by the Central Booking Office (CBO).

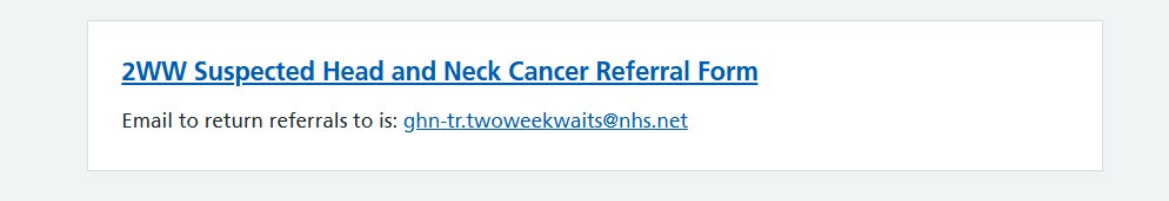
CBO will continue their current process by adding the referral to TrakCare and attaching the documents received on the referral email. This web tool is currently live at https://web.glos.nhs.uk/oralsurgeryreferral.

Landing Page

The screenshot below is the landing page of the referral portal. It contains buttons to start the referral types allowed by the department. All of the referrals are electronic and are completed on the platform except the **2WW Suspected Head and Neck Cancer Referral Form** which is expected to be downloaded (as a Microsoft doc), filled and sent back as a doc document or scanned document to a special inbox exclusive for this type of referral **ghn-tr.twoweekwaits@nhs.net**



2WW Suspected Head and Neck Cancer Referral Form



The **2WW Suspected Head and Neck Cancer Referral Form** links to a document that is expected to be downloaded (as a Microsoft doc), filled and sent back as a doc document or scanned document to a special inbox exclusive for this type of referral **ghn-tr.twoweekwaits@nhs.net**

Third Molar Referral Form

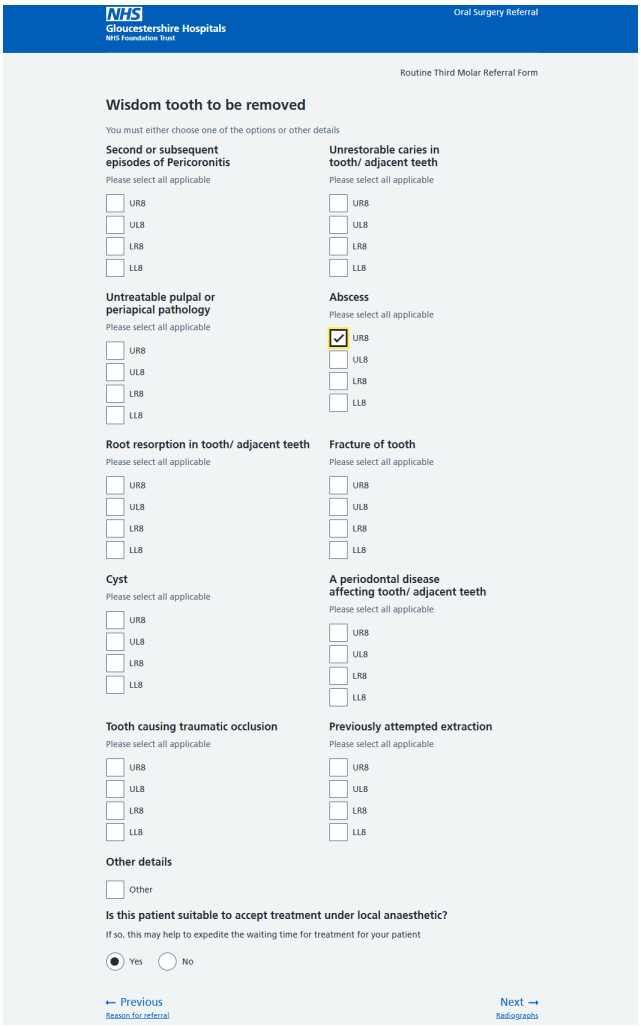
The third molar referral has the following pages.

1. Intermediate Minor Oral Surgery prompt/criteria
2. Consent
3. Best interests' details (optional)
4. Patient details
5. Referrer details
6. Reason for referral
7. Treatment (**Wisdom tooth to be removed**)
8. Radiograph
9. Medical history
10. Patient's GP Details
11. Communication
12. Guideline confirmation

Wisdom tooth to be removed page

This is a page **only on the third molar referral** form for the removal of a wisdom tooth. The page allows the referrer to select what teeth need to be removed, the type of pathology involved, and whether the patient is suitable for treatment under local anaesthetic.

The options for the type of pathology involved are presented in a checkbox format and **at least one of the options** is required to be checked as part of the overall referral process.



Dento-Alveolar Referral Form

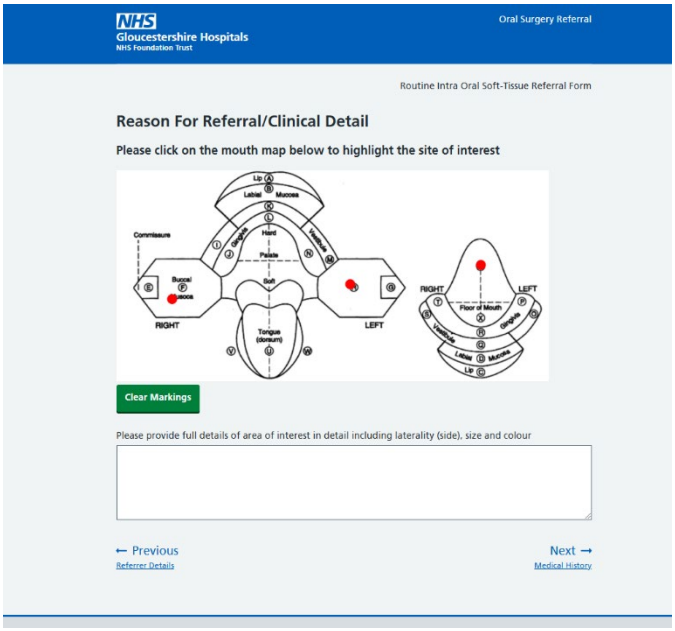
The Dento-Alveolar referral has the following pages.

1. Intermediate Minor Oral Surgery prompt/criteria
2. Consent
3. Best interests' details (optional)
4. Patient details
5. Referrer details
6. Reason for referral
7. Type of Treatment
8. Radiograph

9. Medical history
10. Patient's GP Details
11. Communication
12. Guideline confirmation

Intra Oral Soft-Tissue Referral Form

The Intra Oral Soft-Tissue referral has the following pages:



1. Consent
2. Best interests' details (optional)
3. Patient details
4. Referrer details
5. Reason for referral (**Mouth Map page**)
6. Medical history
7. Patient's GP Details
8. Communication
9. Guideline confirmation

Mouth Map page

This page is only present on the **Intra Oral Soft-Tissue Referral Form** and focuses on identifying the **clinical area of concern**. It allows the referrer to:

1. Use an **interactive mouth map** to highlight the **site of interest**.
2. Provide further details about the area.

The page ensures accurate documentation of the problem area (highlighted image included in the referral sent to the CBO), aiding in the diagnosis and referral process for soft-tissue conditions.

Temporo-Mandibular Joint Referral Form

The Temporo-Mandibular Joint referral has the following pages:

1. Consent
2. Best interests' details (optional)
3. Patient details
4. Referrer details
5. Treatment (**Type + History + Anaesthetic**)
6. Medical history
7. Patient's GP Details
8. Communication
9. Guideline confirmation

Apical Surgery Referral Form

The Apical Surgery referral has the following pages:

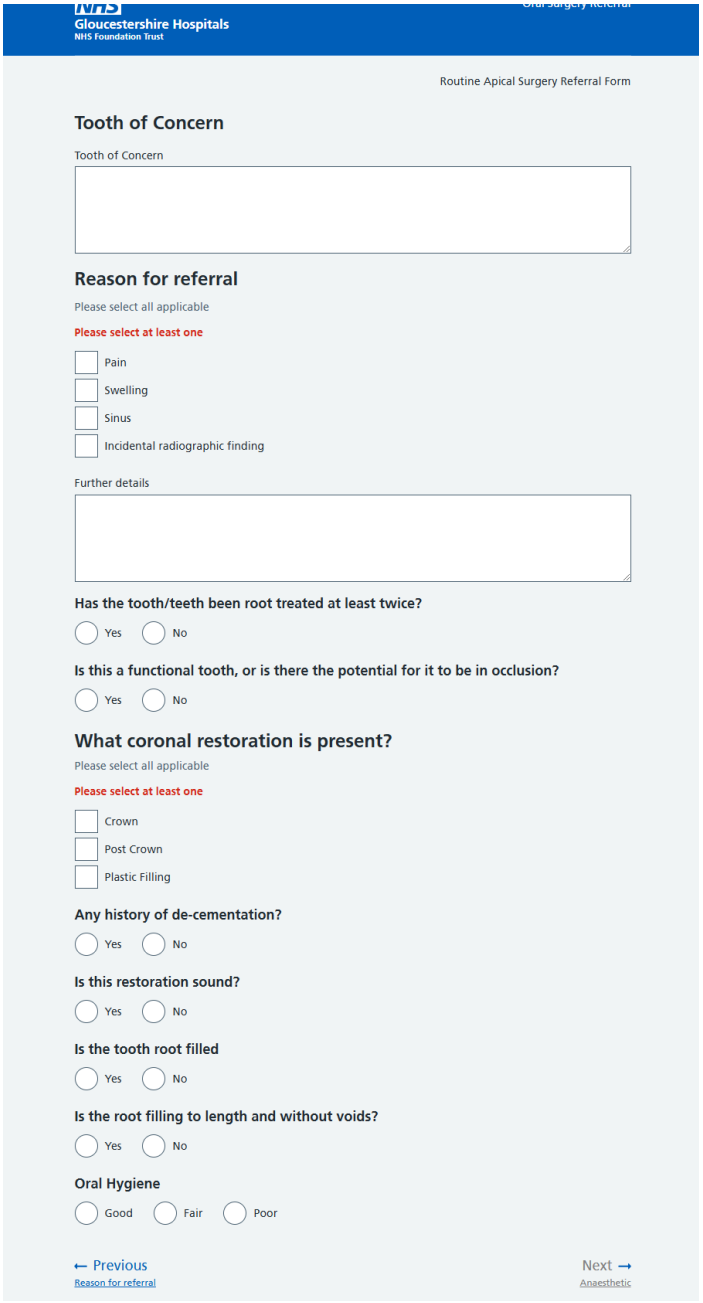
1. Consent
2. Best interests' details (optional)
3. Patient details
4. Referrer details
5. Reason for referral
6. Reason for referral (**Tooth of Concern**)
7. Treatment (**Anaesthetic**)
8. Radiograph
9. Medical history
10. Patient's GP Details
11. Communication
12. Guideline confirmation

Tooth of Concern page

This page is part of a multi-page **only on the Routine Apical Surgery Referral Form**. It collects specific details about the **tooth of concern** and the **reason for referral**, including:

1. **Tooth of Concern**
2. Information on prior **root treatments** and the tooth's functionality.
3. **Coronal Restoration**: Identifying any restoration work along with questions about de-cementation and restoration soundness.
4. **Oral Hygiene**: An assessment of the patient's oral hygiene.

The page helps determine the condition and history of the affected tooth, guiding the referral process for appropriate treatment.



Other Oral and Maxillo-facial Surgery Referral Form

This is the form for referral for other types of surgeries that do not fit into the categories of the other referrals. The Other Oral and Maxillo-facial Surgery referral has the following pages.

1. Consent
2. Best interests' details (optional)
3. Patient details
4. Referrer details
5. Reason for referral
6. Type of Treatment
7. Radiograph
8. Medical history
9. Patient's GP Details
10. Communication

11. Guideline confirmation

Form Pages

The form contains a set of pages that are usually found in more than one type of referral forms on the portal. This section of the guide gives an overview of these pages and some screenshots to summarise their purpose and what kind of data they collect.

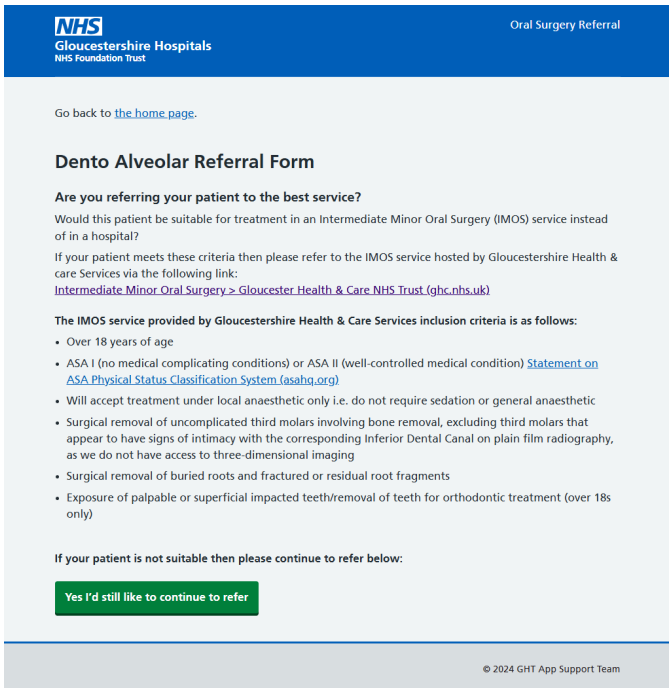
Intermediate Minor Oral Surgery prompt/criteria page

This page provides information for the referrer to check whether the patient is eligible for the **Intermediate Minor Oral Surgery (IMOS)** service provided by Gloucestershire Health & Care Services. The page outlines the IMOS service criteria.

If the patient meets these criteria, they should be referred to the IMOS service. If not, users are prompted to continue to the **next section** of the referral form for alternative options.

This page is presented on the start of the:

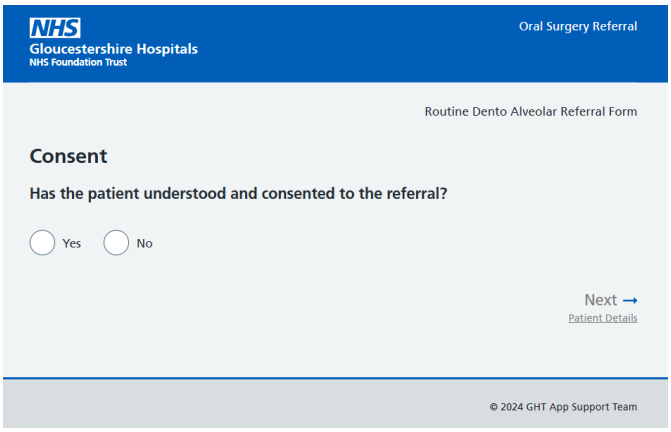
Dento-Alveolar Referral Form and **Third Molar** referral forms.

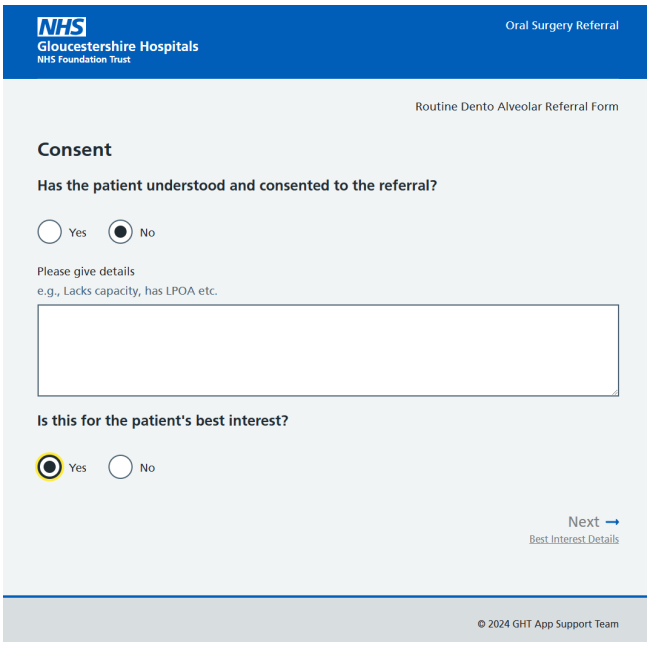


Consent page

This page is on **all referral forms on the portal**. The main purpose of this page is to obtain the patient's consent for the referral. This page also checks if the referral is in the **patient's best interest** (if the patient does not consent).

If the consent is "No" or the referral is not in the patient's best interest, the form **collects the patient details and then ends**. However, if the consent is "Yes", the form skips the **best interest** page and move on to the next step in the referral process.



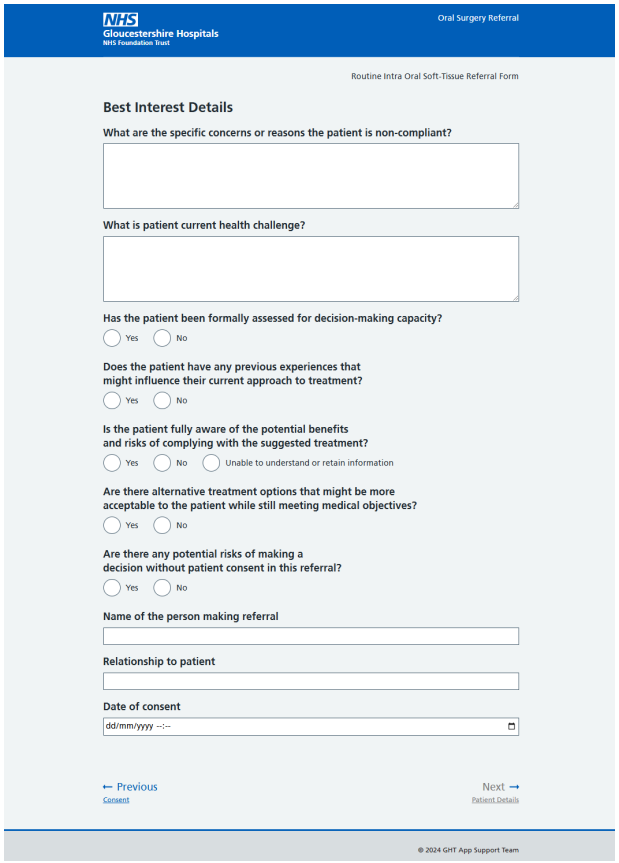


Best Interest page

This is an **optional** page focused on gathering additional details to assess whether the proposed referral is in the patient's best interest.

It includes fields for the referrer to document the patient's specific concerns, health challenges, decision-making capacity, previous experiences, awareness of benefits/risks, alternative treatment options, and any potential risks of making the referral decision without consent.

The page also collects information about the referrer and their relationship to the patient.

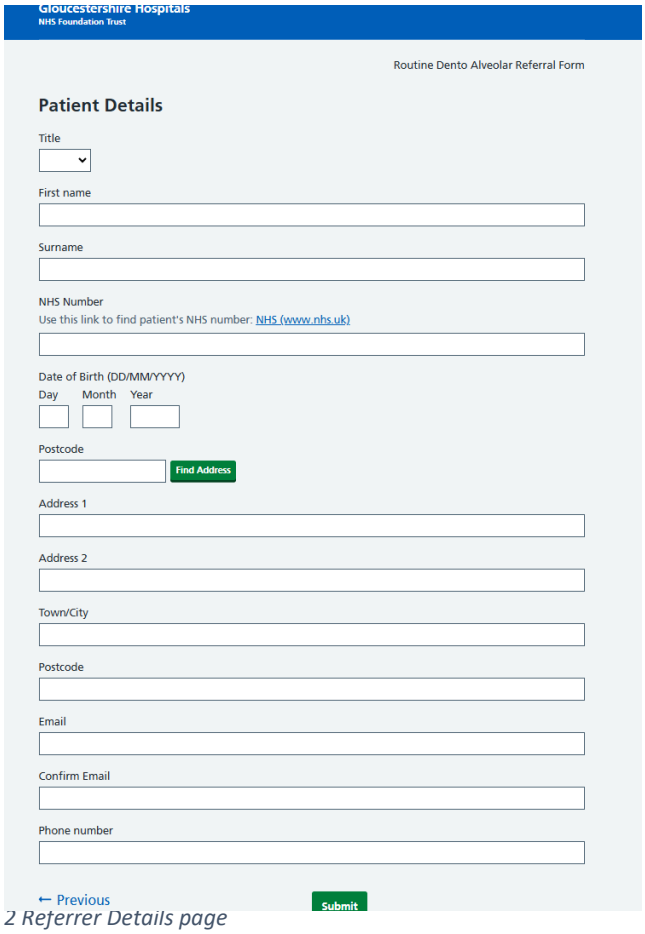


Patient Details page

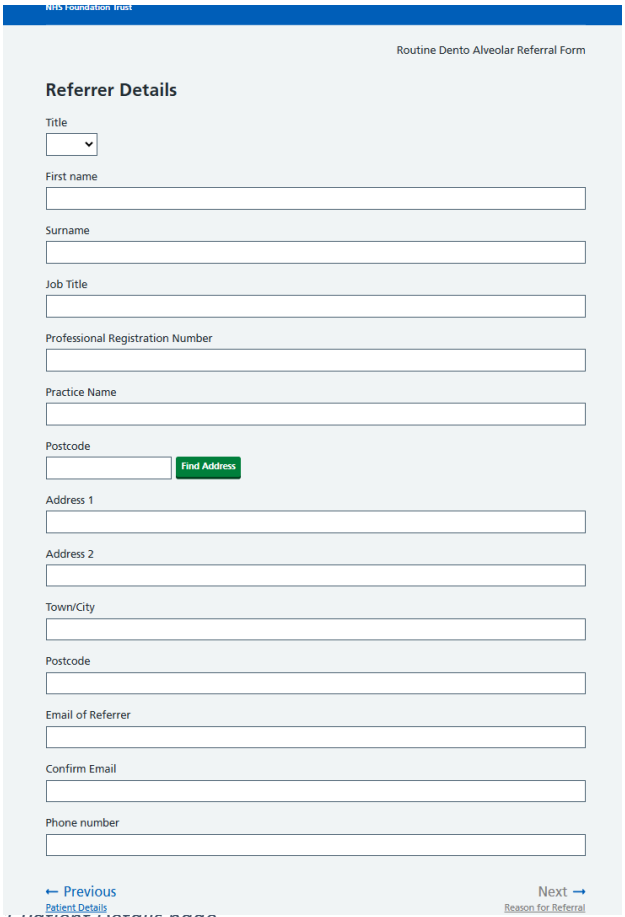
This page collects basic contact information on the patient being referred. Including other information like their NHS number and Date of birth to help with record management.

Referrer Details page

This page collects basic contact information about the on referrer and the referrer's practice. This is done for record management.



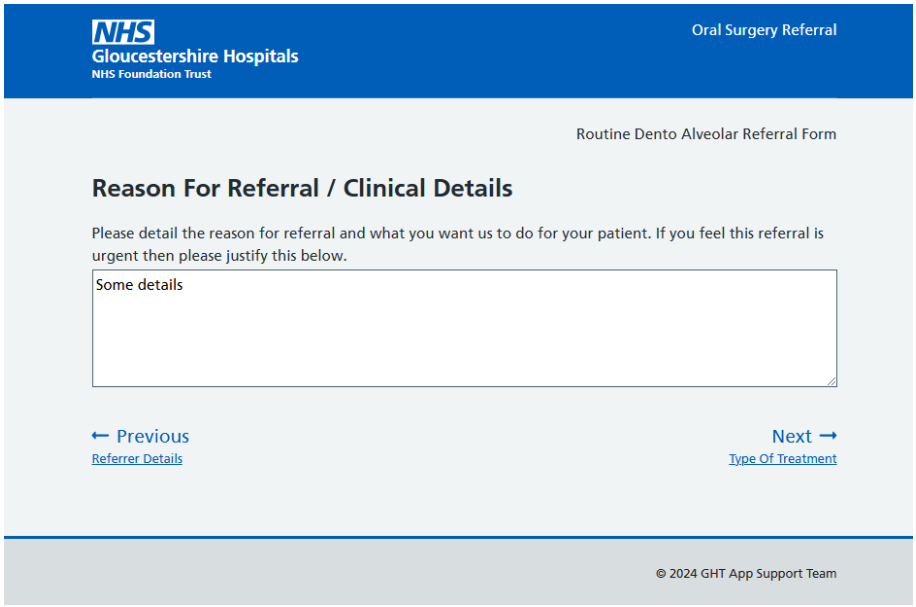
2 Referrer Details page



1 Patient Details page

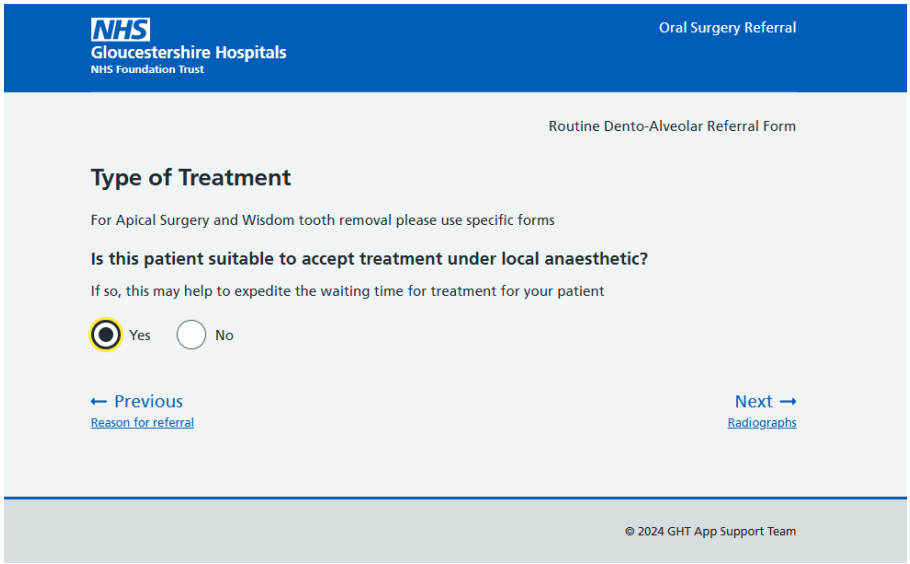
Reason for Referral/Clinical Details page

This page collects information on the reason for referral. **All referrals on this portal have a specialised variation** of this page, for example the **Intra-Oral** has a specialised version of this page that includes an **interactive mouth map**, the apical surgery referral page includes questions that specify the tooth of concern.



Treatment page

This page collects information on the treatment conditions. **Some referral forms** on the portal have a **specialised variation** of this page



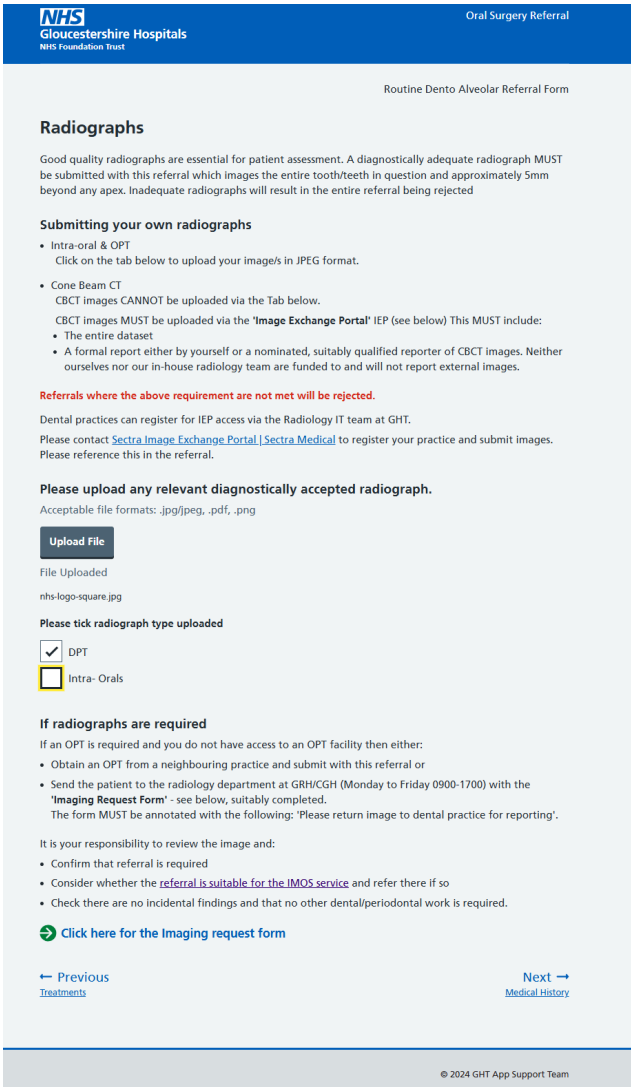
Radiograph page

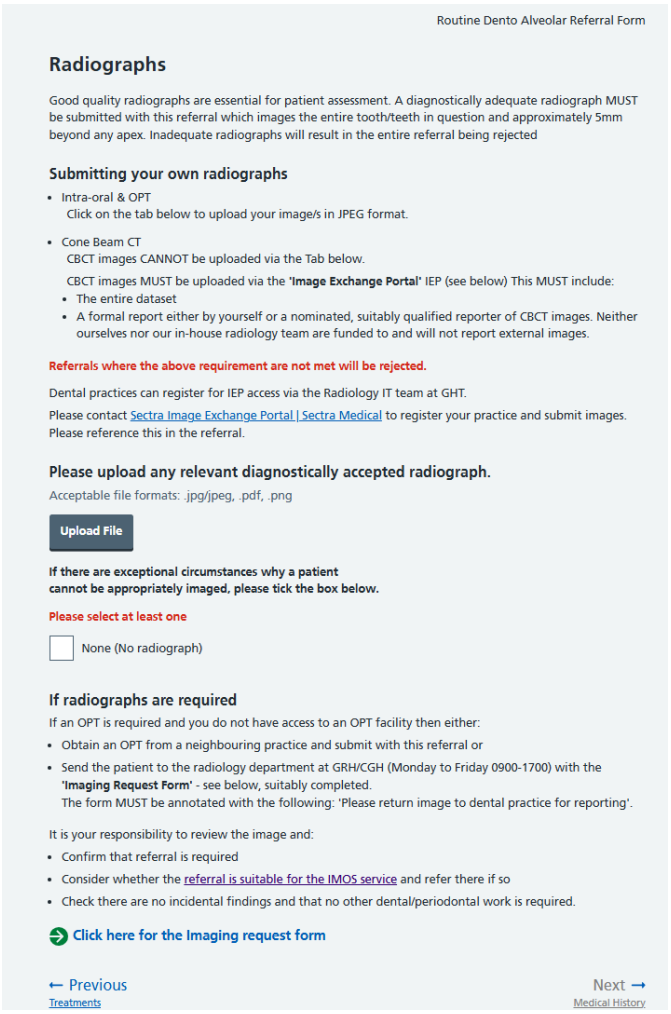
This page to be focused on the radiographic requirements for the dental/oral surgery referral process. It allows provides the referrer:

1. **Instructions for submitting radiographs**
2. **Radiograph requirements**
3. **Guidance on obtaining and submitting radiographs**
4. **Interface for submitting a Radiograph**
5. **Responsibilities of the referrer**
6. **Link to the Imaging Request Form**

Overall, this page provides detailed guidance on the radiographic requirements and submission process for the dental/oral surgery referral.

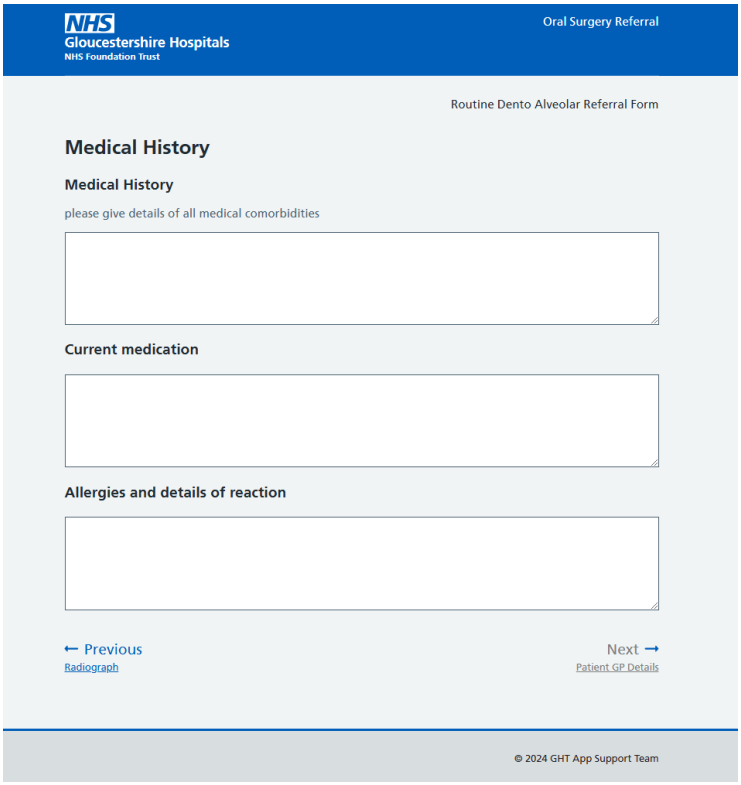
This page is present on **all forms, except: Intra Oral Soft-Tissue Referral** and **Temporo-Mandibular Joint referral forms.**





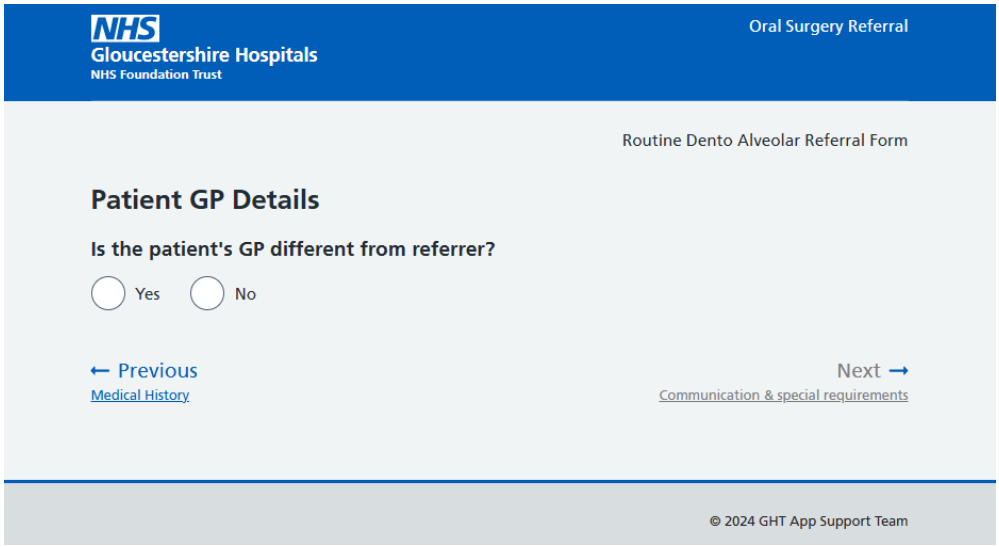
Medical History page

All referral forms on this portal have a page for collecting the medical history of the patient being referred. All questions on this page are mandatory.



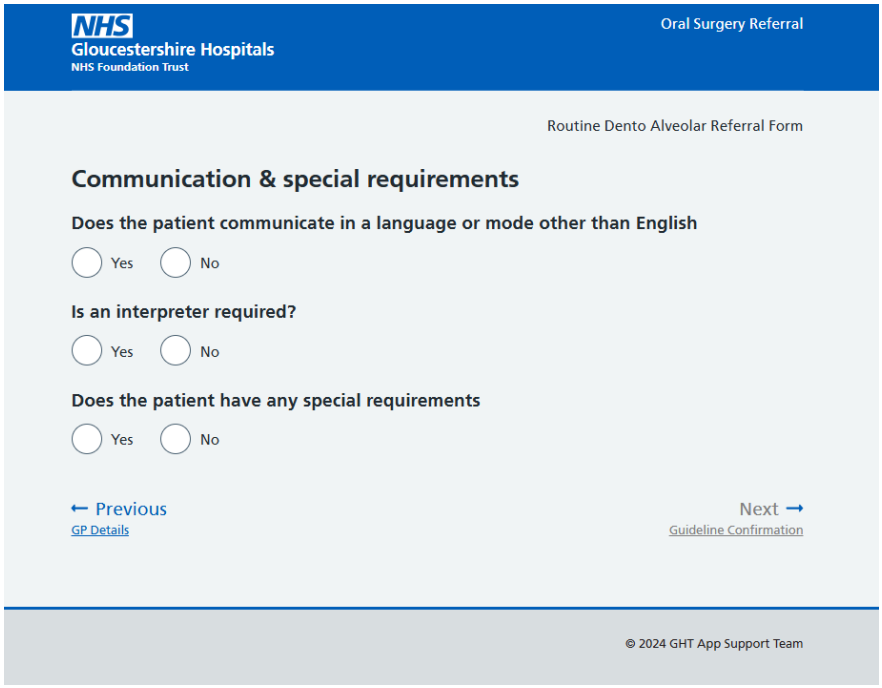
Patient's GP page

This page is present on all forms on the portal and is used to collect the Patient's GP information in the case where **the referrer is different from the GP** of the patient. It collects identical information as the **Referrer Details** page.



Communication & special requirements page

This page is present on all forms on the portal and is used to collect information about special communication requirements that the patient may have.

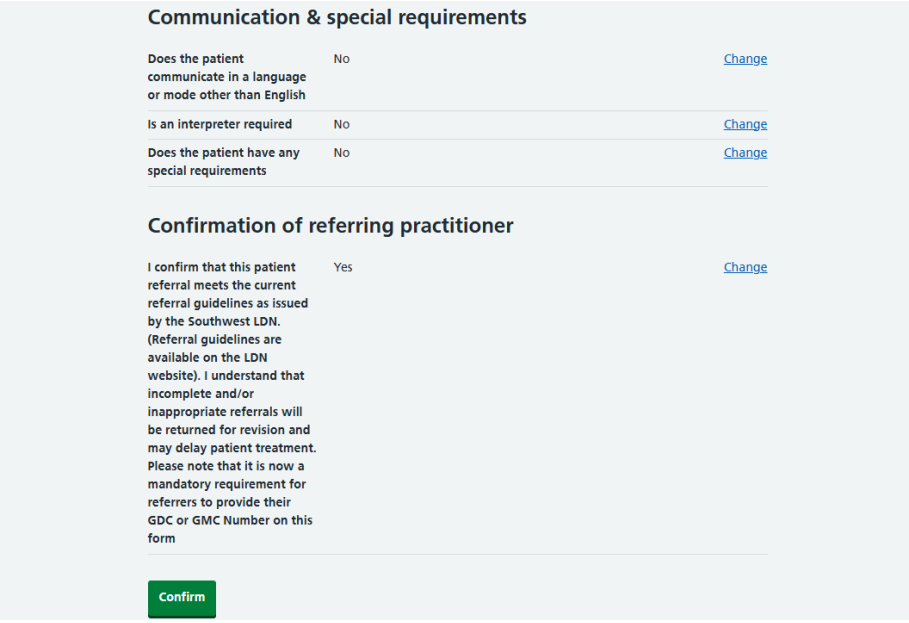


Guidelines confirmation & referral summary and submission confirmation pages

All referral forms on this portal ends with a page displaying the referral guidelines as issued by the Southwest LDN. This confirmation is required to complete the referral.

After the referral is completed, the form navigates to the referral page and shows a summary of the answers for all pages to be reviewed and confirmed correct before submission.

On a successful submission, the user gets a confirmation screen to indicate that the form has been collected.



3 Summary page

Email

On Referral Submission

An email with the link to the completed referral will be sent to the CBO on completion of the referral.

On Referral Approval

When a referral gets approved, an email is sent to the referrer. Find below an example approval email.

On Referral Rejection

When a referral gets rejected, an email is sent to the referrer. Find below an example approval email.

Troubleshooting

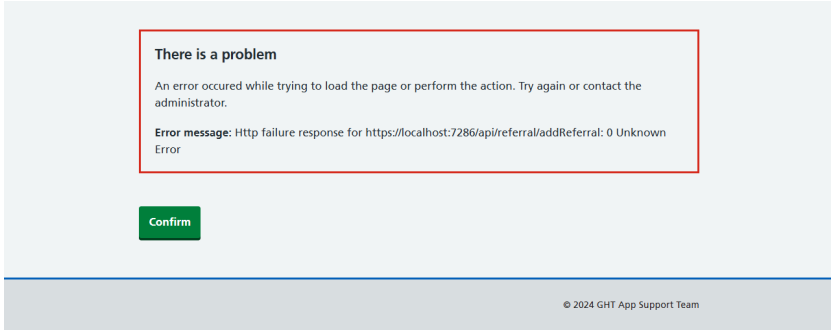
Input Validation

All the referral forms on this portal are multi-page/multi-step forms that require all inputs to be valid before continuing on to the next step. When any input on the page is not valid or not answered the button for the next page would be greyed out and the user would not be able to continue with the referral.

Errors

When an action fails, e.g. a submission fails after clicking submit, an appropriate error message would be displayed (see screenshot below for example error message). While some errors may be a temporary glitch it is important to report such errors when they occur.

A request should be logged on TopDesk and;

- A screenshot of the error,
- Information about the page it occurred on (e.g. Dento-Alveolar referral form, summary page) and
- The action that triggered the error (e.g. On clicking of the submit button).

Should all be added to the TopDesk query as this helps to identify the issue quicker.