

Indications for referral from secondary to tertiary care

- ✓ There is no definitive reason to refer to tertiary care.
 - ✓ Variables include: the clinician, patient, geography and tests available.
-

Reasons for Referral

- Diagnostic doubt.
- Investigations that cannot be performed locally
- Reassurance of clinician, family or both.
- Steroid dependency
- “See the expert”
- Poor asthma control defined as more than 2 courses prednisolone a year, more than 2 admissions a year and more than two doses of salbutamol a week despite local management

What to expect from a tertiary opinion?

- **Diagnostic confirmation:**
- Review of diagnosis
- Additional investigations eg High Resolution Computerised Tomography (HRCT), bronchoscopy and biopsy
- Alternative/ Additional Treatments eg omalizumab® , (New monoclonal antibodies), Subcutaneous terbutaline, new inhalers (recently Revlar Ellipta® once daily combination Inhaler)