

# Statewide Referral Criteria – Chronic pain – referral requirements

Clinical condition	Pain history - onset, location, nature and duration	Psychological status and cognitive function	Previous pain management RX and outcomes	Comprehensive past medical history	History of alcohol, recreational or injectable drugs or prescription medicine misuse	Current and complete medication history (inc. non prescription, herbs & supplements)	Previous neurology assessments or opinions	Physical examination findings	Current behaviours that may impact ability to participate in chronic pain management program	Symptoms of or diagnosed with post traumatic stress disorder (PTSD)	Details of surgery or trauma	Details of chemotherapy/radiotherapy treatment
Pain that requires complex medication management	✓	✓	✓	✓	✓	✓			✓			
Persistent or chronic neuropathic pain	✓	✓	✓	✓	✓	✓				✓		
Persistent or chronic pain in cancer survivors	✓	✓	✓	✓	✓	✓					✓	✓
Persistent or chronic pain in post-surgical or post-traumatic patients	✓	✓	✓	✓	✓	✓					✓	
Persistent or chronic primary pain	✓	✓	✓	✓	✓	✓						
Persistent or chronic secondary headache or orofacial pain	✓	✓	✓	✓	✓	✓	✓					
Persistent or chronic secondary musculoskeletal pain	✓	✓	✓	✓	✓	✓						
Persistent or chronic visceral pain	✓	✓	✓	✓	✓	✓		✓				

These are the minimum referral requirements for the above conditions  
 Referrals will be declined if required information is not provided  
 Reviewed January 2021