

## Self-Referral Information for Patients

### Please keep this leaflet for future reference

Lymphoedema is a long-term condition that will require ongoing management to maintain improvement and prevent the condition from getting worse. Self-management are treatments that you have been recently taught by your therapist that you can do yourself to keep well. Some patients are happy to self-manage and only need to be seen if the lymphoedema changes or you need new compression garments.

### How do I refer myself to my local Lymphoedema Service?

You do not need to be referred by someone else, just complete the Referral Form included with this leaflet and then email or post to your local Lymphoedema clinic. Please complete as much information as you can.

### What should I continue to do to keep well?

- 1. Skincare:** you should continue with regular washing, drying, and moisturising of your skin. Use a moisturising cream of your choice. If you have been recommended a medical cream, this can be provided on prescription from your GP (General Practice).
- 2. Move your body:** continue doing the activities agreed with your therapist. Keeping physically active is important to help you manage your lymphoedema, and an active lifestyle is encouraged. Moving a few more steps, taking the stairs instead of the lift, bit of dancing, anything that gets us moving is good. If you want to increase your activity some GP Surgeries can refer you to the National Exercise Referral Scheme.
- 3. Weight management:** being overweight can make your swelling much worse. Try to maintain a normal BMI of 25. Seek advice and guidance from your GP if you are struggling to maintain a normal weight. Lots of GP Surgeries now have access to Slimming Clubs or NHS Weight Management groups that you can try for free.
- 4. Compression garments:** use a clean garment every time you wear it. Follow the washing instructions provided with the garment packaging. You can wash the garments in the washing machine. Do not use damaged garments, for example if they have holes or ladders, as it will not provide the right compression for your lymphoedema. Some patients may continue to use their garments daily whereas others only a few times a month.

The details of your compression garments that you were given are:

<b>Company:</b>		<b>Code:</b>	<b>Size:</b>
<b>Compression class:</b>	<b>Garment colour:</b>	<b>Style:</b>	
<b>Your NHS Number is:</b>			

### Think you may have cellulitis (infection)?

Cellulitis is a skin infection that can occur if you have lymphoedema. The signs and symptoms of cellulitis are:

- The area will be red or there is a rash;
- It is hot to touch compared to the opposite side;
- Is usually tender or painful;
- Increase in your swelling;
- You may feel generally unwell (as if you have the flu) or have nausea and/or vomiting.

If you think you have cellulitis, it is especially important that you seek medical help immediately from your GP. If you notice these symptoms out of hours, contact your out of hours GP service. It is important to act quickly to prevent the infection from getting any worse, and to prevent further damage to your lymphatics. You will need antibiotics as soon as symptoms occur, and you must take them for **no less than two weeks**.

**What else?** We have extensive range of video films that can help with self-management. Scan the QR code below or type in the following link: [www.medic.video/w-lymph](http://www.medic.video/w-lymph)



<b>Therapist Name:</b>	<b>Signed:</b>	<b>Date:</b>
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# Lymphoedema Wales Clinical Network Adult Referral Form

Please complete all sections where possible, using CAPITALS or typed font

Patient Information	
1	Title & Full Name
	Date of Birth (DD/MM/YYYY)
	NHS Number (find your NHS number at www.nhs.uk)
	Address
	Telephone
	Email

GP Details	
2	GP Name
	Telephone
	Surgery Address

Lymphoedema History	
3	Please tick area(s) of swelling
	Site: <input type="checkbox"/> Right Arm <input type="checkbox"/> Left Arm <input type="checkbox"/> Right Leg <input type="checkbox"/> Left Leg <input type="checkbox"/> Genital <input type="checkbox"/> Breast/Trunk <input type="checkbox"/> Head/Neck <input type="checkbox"/> Abdomen
	When did swelling start?
	Current problem/ reason for referral/self-referral
	Are wounds present? <input type="checkbox"/> Yes (Where? How Long?) <input type="checkbox"/> No
	Is there any leaking of fluid from the swollen area (lymphorrhoea)? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are compression bandages or garments being used?
	<input type="checkbox"/> Yes (specify) <input type="checkbox"/> No
	Who is involved with this care?
	<input type="checkbox"/> District Nurse <input type="checkbox"/> Leg Club <input type="checkbox"/> Wound Clinic <input type="checkbox"/> Podiatry <input type="checkbox"/> Practice Nurse <input type="checkbox"/> Dermatology <input type="checkbox"/> Other (specify)

Weight & Height	
4	Weight _____ Height _____


Medical History <i>(Please also attach GP patient summary if available. Use space to comment if necessary)</i>	
5	Cardiac <input type="checkbox"/> Yes <input type="checkbox"/> No
	Vascular/Arterial Disease <input type="checkbox"/> Yes <input type="checkbox"/> No
	Diabetes <input type="checkbox"/> Yes <input type="checkbox"/> No
	Skin Conditions <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mental Health Diagnosis <input type="checkbox"/> Yes <input type="checkbox"/> No
	Dementia <input type="checkbox"/> Yes <input type="checkbox"/> No
	Learning Difficulty <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mobility Restrictions (specify) <input type="checkbox"/> Yes <input type="checkbox"/> No
	Fractures (in the last 10 years) <input type="checkbox"/> Yes <input type="checkbox"/> No
Cancer History (specify) <input type="checkbox"/> Yes <input type="checkbox"/> No	

	Currently Receiving Cancer Treatment	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Two or more episodes of Cellulitis in 1 year	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Other (specify)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

What are the expectations of this referral	
6	

Referrer Details		
7	Self-Referral	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Full Name and Role	
	Telephone/Mobile	
	Email	
	Referral Date (DD/MM/YYYY)	
	Has the patient agreed to this referral?	<input type="checkbox"/> Yes <input type="checkbox"/> No

8	Additional Information (if required)	Further Information
		Visit <a href="http://www.lwcn.nhs.wales">www.lwcn.nhs.wales</a> If you require any further information on lymphoedema please contact Lymphoedema Wales Clinical Network on 01639 862767 or <a href="mailto:LymphoedemaNetworkWales@wales.nhs.uk">LymphoedemaNetworkWales@wales.nhs.uk</a>



SEND REFERRAL TO				
Health Board Lymphoedema Service Headquarters (other local clinics available)				
9	<b>Aneurin Bevan University Health Board:</b>	📍 Lymphoedema Department, Springfield Day Unit, St Woolos Hospital, Newport NP20 4SZ	☎ 01633 238 464 ✉ <a href="mailto:ABB_registration@wales.nhs.uk">ABB_registration@wales.nhs.uk</a>	
	<b>Betsi Cadwaladr University Health Board:</b>	📍 Lymphoedema Clinic HQ, Department 20, Wrexham Maelor Hospital, Croesnewydd Road, Wrexham LL13 7TD	☎ 03000 848 360 ✉ <a href="mailto:BCU.LymphoedemaReferralsEast@wales.nhs.uk">BCU.LymphoedemaReferralsEast@wales.nhs.uk</a>	
	<b>Cardiff and Vale University Health Board:</b>	📍 Lymphoedema Clinic, Cardiff Royal Infirmary, Glossop Road, Cardiff CF24 0SZ	☎ 02920 335 280 ✉ <a href="mailto:Lymphoedema.CAV@wales.nhs.uk">Lymphoedema.CAV@wales.nhs.uk</a>	
	<b>Cwm Taf Morgannwg University Health Board:</b>	📍 Lymphoedema Clinic, Dewi Sant Hospital, Albert Road, Pontypridd CF37 1LB	☎ 01443 443 499 ✉ <a href="mailto:CTM_Lymphoedema@wales.nhs.uk">CTM_Lymphoedema@wales.nhs.uk</a>	
	<b>Hywel Dda University Health Board:</b>	📍 Lymphoedema Department, Ty Geraint, Bronglais Hospital, Aberystwyth, Ceredigion SY23 1ER	☎ 0300 303 8322 Select Option 5 ✉ <a href="mailto:lymphoedema.generic@wales.nhs.uk">lymphoedema.generic@wales.nhs.uk</a>	
	<b>Powys Teaching Health Board:</b>	📍 Lymphoedema Clinic, Ystradgynlais Community Hospital, Glanrhyd Road, Ystradgynlais, Powys SA9 1AU	☎ 01639 846 423 ✉ <a href="mailto:powys.lymphoedema@wales.nhs.uk">powys.lymphoedema@wales.nhs.uk</a>	
	<b>Swansea Bay University Health Board:</b>	📍 Lymphoedema Clinic, Singleton Hospital, Swansea, SA2 8QA	☎ 01792 285 252 ✉ <a href="mailto:lymphoedema.clinic@wales.nhs.uk">lymphoedema.clinic@wales.nhs.uk</a>	
10	OFFICE USE ONLY	<input type="checkbox"/> Standard	<input type="checkbox"/> Non-standard (including End of Life)	<input type="checkbox"/> Reducing the risk

Once this referral has been received it will be assessed by the local lymphoedema service. They will contact the patient by telephone or letter, if a telephone consultation is not suitable due to communication difficulties, please tick this box.