

Frequently Asked Questions

A. First Available Appropriate Specialist Triage Model

1. *What led to the implementation of the First Available Appropriate Specialist (FAAST) Triage model?*

The desire to provide more timely access to Orthopaedic and Musculoskeletal care for your patients and provide the right level of care by the most appropriate clinician.

2. *What advantage does this model provide me as a family physician?*

- Reduce wait times and improved access of care
- Removing the frustration of trying determine the most appropriate surgeon or MSK specialist
- A single entry referral & triage process reducing the need for multiple referrals

3. *What advantage does this model provide my patients?*

- Enables an earlier consultation with the first available appropriate MSK specialist for their condition
- Non-operative treatment can be initiated while waiting to be seen by the most appropriate surgeon, if surgery is indicated for the condition. This allows for improved quality of life for your patient.

4. *Does this mean I can no longer refer my patient to a specific Orthopaedic Specialist?*

FAAST is optional. Feedback from our experience over the past year indicates most patients like this model as it enables them to be seen earlier. Patients and their physicians remain free to seek a consultation from any specialist they choose. Depending on the wait list of a specific orthopaedic specialist, the wait time to be seen may be longer.

5. *What types of clinicians are associated with ReBalance^{MD}?*

- Orthopaedic Surgeons
- Non-operative Orthopaedic Surgeons
- Sports Medicine
- Osteoporosis Medicine
- Physical Medicine and Rehabilitation
- Physiotherapists
- Pedorthist for Bracing & Orthotics

6. *How are referrals triaged and by who?*

Referrals are triaged by a musculoskeletal physician or surgeon, who also reviews the imaging. This clinician will then assign the patient to an appropriate clinician based the referral acuity and the clinical condition.

B. New Single Entry Referral Form

1. *Why should I use this referral form? I already have a referral template that I use.*

Implementing a standard referral form was seen as a way to improve the efficiency of the referral process. As probably no surprise to you, the quality and completeness of referrals ranges widely from excellent to incomplete. When incomplete, it limits the ability to properly triage the referral.

Other benefits are:

- Patients are less likely to experience waits due to missing or incomplete information
- Enables the first specialist visit to be as productive as possible

We are pleased to say, that this referral form was collaboratively developed and trialed by a small group of family physicians.

2. *I would like to use the FFAST program but my patient has already seen a sports medicine specialist or physiatrist and I wish them to see an Orthopaedic specialist. What should I do?*

Please indicate this information on your referral form. (If available, please attach the consultation report)

3. *Are there exceptions to the referral requirement to provide x-rays for adult patients?*

In the majority of cases, x-rays assist in the triage of the referral. However, if in the opinion of the referring physician, an x-ray is not required, this should be indicated in the medical imaging section located at the bottom of the referral form.

4. *What other improvements have you made to the referral/consultation process?*

ReBalance^{MD} is committed to continuously improving our communications with our family physician colleagues. Based on the initial feedback from a small group of family physicians engaged through the Partners in Care program, we have introduced:

- A receipt of referral acknowledgement
- Confirmation of appointment provided to the family/referring physician and patient
- Medical Imaging guidelines
- Orthopaedic surgeons sub-specialty directory

If you have additional questions, please contact ReBalance^{MD} at 250-940-4444