Conditions including

Carotid Artery Disease
Abdominal Aortic Aneurysm
Renal Artery Stenosis
Peripheral Arterial disease

Popliteal Artery Aneurysm
Varicose Veins - including thrombophlebitis
Venous ulceration
Post phlebitic syndrome

Carotid Artery Disease

Considerations for GP/Primary care management

• Commence aspirin
• Manage hypertension
• Stop smoking
• Management of diabetes

Indications for specialist referral

• Neurological deficit
• Crescendo or multiple TIA/RIND
• Amaurosis fugax
• Peripheral pulse deficit
• Carotid bruit
• Asymptomatic carotid stenosis < 80% on imaging
• Subclavian stenosis or vertebral steal
• Carotid body tumour

Referral information required

• Clinical history and examination
• Cardiovascular assessment
• Treatment currently prescribed
• Results of ultrasound, duplex scan, CT angiogram or MRI

‘Red flag’ items

• Refer to Emergency
  • Crescendo or multiple TIA’s
  • RIND (reversible ischemic neurologic deficit)
• Urgent Referral
  • Isolated TIA/RIND
  • Asymptomatic carotid stenosis of > 80% on imaging
  • Amaurosis deficit
  • Amaurosis fugax

• Where there is significant co-morbidity, discussion with the Vascular Service is appropriate prior to referral.
• When urgent referral is indicated: Please contact the on call Surgical Registrar through Cairns Hospital switchboard 4226 0000

Great state. Great opportunity.
Abdominal Aortic Aneurysm

Considerations for GP/Primary care management

- Manage risk factors
- Follow-up surveillance ultrasound scans - any increase of 1cm or more within 12 months - refer

Indications for specialist referral

- History and risk factors
- Note genetic factors and collagen disorders
- Known Aortic Aneurysm

Referral information required

- Clinical history and examination
- Treatment currently prescribed
- Abdominal ultrasound
- CT: fine slice if > 5cm
- Angiogram

‘Red flag’ items

- Refer to Emergency
  - Aneurysm of 7cm diameter - contact Vascular Consultant
- When urgent referral is indicated: Please contact the on call Surgical Registrar through Cairns Hospital switchboard 4226 0000
Renal Artery Stenosis

Indications for specialist referral

- Patients history
- Evidence of deteriorating renal function
- Suspicion renovascular or resistant hypertension
- Evidence from renal ultrasound

Referral information required

- Clinical history and examination
- Treatment currently prescribed
- Renal USS

Refer to Renal Physicians for assessment, not to Vascular Surgeons
Peripheral Arterial Disease

Considerations for GP/Primary care management

- Lifestyle advice re: smoking/diabetes
- Advice re: graduated exercise program
- Stable long distance claudication

Indications for specialist referral

- History and risk factors
- Incapacitating claudication
- Rest pain
- Ulceration
- Gangrene
- Note genetic factors and collagen disorders
- Clinical examination
- Peripheral pulses
- Ischaemic changes or rest pain

Referral information required

- Clinical history and examination
- Treatment currently prescribed
- Investigation results – duplex Doppler, CT angiogram

‘Red flag’ items

- Refer to Emergency
  - Acute ischaemia
- Urgent Referral
  - Short distance claudication < 30 metres
  - Rest pain critical ischaemia
- When urgent referral is indicated: Please contact the on call Surgical Registrar through Cairns Hospital switchboard 4226 0000
Po|liteal  Aneurysm

Indications for specialist referral

- Evidence on ultrasound, CT angiogram, Duplex scan or MRI

Referral information required

- Clinical history and examination
- Treatment currently prescribed
- Investigation results - ultrasound and CT angiogram

‘Red flag’ items

- Refer to Emergency
  - >2.0 cm diameter or symptomatic - muscle/foot pain or limb ischaemia
- Urgent Referral
  - - >2.0 cm diameter
- When urgent referral is indicated: Please contact the on call Surgical Registrar through Cairns Hospital switchboard 4226 0000
Varicose Veins - including thrombophlebitis, venous ulceration, post-phlebitic syndrome

Considerations for GP / Primary care management

- Mild cases to be managed by GP
- Consider graduated stockings if medically unfit for surgery
- Refer moderate to severe cases

Indications for specialist referral

- Moderate to severe cases
- Venous ulcers
- Haemorrhage from varicose
- Positive investigations - duplex scan

Referral information required

- Clinical history and examination
- Treatment currently prescribed
- Investigation results - duplex scan
- Claudication distance

‘Red flag’ items

- Refer to Emergency
  - Ascending thrombophlebitis to the level of saphenofemoral junction
- Urgent Referral
  - Venous ulcers
  - Haemorrhage from veins
  - Infected ulcers
  - Thrombophlebitis
- When urgent referral is indicated: Please contact the on call Surgical Registrar through Cairns Hospital switchboard 4226 0000