

Austin Health holds a weekly Rapid Access Bone Clinic for people with severe or complex osteoporosis needing **specialist osteoporosis management**. Due to an overwhelming demand for this service, we are currently **only accepting referrals for patients meeting the criteria below**.

### Department of Health clinical urgency categories for specialist clinics

For all emergency cases that require immediate review, or pose an immediate risk to life or limb, please dial 000 or send the patient to the Emergency Department.

**Urgent:** Referrals should be categorised as urgent if the patient has a condition that has the potential to deteriorate quickly, with significant consequences for health and quality of life, if not managed promptly. These patients should be seen **within 30 days** of referral receipt.

**Routine:** Referrals should be categorised as routine if the patient's condition is unlikely to deteriorate quickly or have significant consequences for the person's health and quality of life if specialist assessment is delayed beyond one month.

#### **Referral Process**

**GP Referral Guide:** Please see below conditions accepted into this clinic and provide the relevant investigations required below to aid in the appropriate triaging of your patient.

Patient instructions: Please instruct your patient to bring ALL their diagnostic results to their Specialist Clinic appointment.

**Exclusion criteria:** Referrals will be <u>declined</u> if they meet any of the below exclusion criteria:

- Osteoporosis not commenced antiresorptive therapy
- No previous DEXA scan or minimal trauma fracture
- Age-appropriate osteopenia without fracture
- Patients with a life expectancy < 6 months</li>
- Age < 18 years old</li>
- Men without renal transplant or on dialysis requiring osteoporosis assessment please refer to the Men's Health Clinic (https://www.austin.org.au/Assets/Files/Referral%20quideline%20for%20Men's%20Health%20Clinic.pdf)
- Amenorrhoea in women < 40 years old requiring osteoporosis assessment please refer to the Women's Health Clinic

**Clinic Discharge Exit Criteria:** Your patient will be <u>discharged</u> from our rapid access bone clinic either at the completion of the two visits or sooner if any of the following criteria are met:

- **Initiation of appropriate therapy:** The patient has successfully been initiated on appropriate osteoporosis therapy and no longer requires ongoing specialist Endocrinologist input.
- Transition to Maintenance Phase: The patient is deemed to be ready to transition to a maintenance program under the supervision of their GP.
- Achievement of Bone Mineral Density Goals: The patient has successfully achieved their target bone mineral density as determined by the clinical team.
- **Patient Decision to Cease Attendance:** The patient chooses to discontinue, either due to satisfaction with progress, preference for another treatment approach, or other personal reasons.
- Failure of patient to attend scheduled appointments on two occasions.



- Development of Exclusion Criteria: The patient develops a condition or meets any of the exclusion criteria above
- **Stabilization of Comorbid Conditions:** Associated comorbid conditions, such as hyperthyroidism or hyperparathyroidism, are adequately controlled and ongoing management can be transitioned to the patient's GP.

Condition / Symptom	GP Management	Investigations Required Prior to Referral	Expected Triage Outcome	Expected Specialist Intervention Outcome	Expected number of Specialist Appointments
Persistent osteoporosis despite 3 years of maximum antiresorptive treatment  • Request for consideration of anabolic agents  • Transitioning between antiresorptive therapies	<ul> <li>When to Refer:</li> <li>Age ≥ 18 years</li> <li>No improvement in bone density on serial bone densitometry measurements despite adherence to antiresorptive therapy</li> <li>Fragility fracture despite 12 months of continuous antiresorptive therapy</li> <li>Vitamin D level optimized &gt; 50</li> </ul>	<ul> <li>Age</li> <li>Medical comorbidities</li> <li>Current medications</li> <li>Details of any previous fractures, including location and mechanism</li> <li>Details of previous medical management, including course of treatment and outcome of treatment</li> <li>Pathology</li> <li>Full blood examination</li> <li>Electrolytes/renal function</li> <li>Liver function tests</li> <li>Thyroid function tests</li> <li>Parathyroid hormone level</li> <li>Vitamin D level</li> <li>Calcium, magnesium, phosphate</li> <li>Serum free light chains, serum protein electrophoresis, urine protein electrophoresis</li> <li>Fasting bone turnover markers:         <ul> <li>C-terminal telopeptide of type</li> <li>collagen (CTX) and</li> </ul> </li> </ul>	All urgent patients will be seen in Rapid Access Bone clinic within 4 weeks. Any non-urgent referrals will be seen in Metabolic Bone Clinic.	We will offer a maximum of two visits for review by an endocrinologist.  We will review results of recent pathology and imaging and prescribe non-pharmacological and pharmacological osteoporosis therapy.	Typically, 2 appointments over a period of 6-12 months.  Patients will then be discharged back to their general practitioner's care with a plan for longer-term management.



		Procollagen type 1 N- propeptide (P1NP)  Coeliac disease screening with tissue transglutaminase Ab  Imaging Bone densitometry results Lateral spine X-ray			
Condition / Symptom	GP Management	Investigations Required Prior to Referral	Expected Triage Outcome	Expected Specialist Intervention Outcome	Expected number of Specialist Appointments
Metabolic bone disease associated with:  Glucocorticoid use  Chronic kidney disease  Post-transplant	<ul> <li>Age ≥ 18 years old</li> <li>Vitamin D level optimized &gt; 50</li> </ul>	As above	As above	As above	As above
Condition / Symptom	GP Management	Investigations Required Prior to Referral	Expected Triage Outcome	Expected Specialist Intervention Outcome	Expected number of Specialist Appointments
Osteoporosis in women age < 50 of men age < 60 years	<ul> <li>Age ≥ 18 years old</li> <li>Vitamin D level optimized &gt; 50</li> </ul>	As above	As above	As above	As above



Condition / Symptom	GP Management	Investigations Required Prior to Referral	Expected Triage Outcome	Expected Specialist Intervention Outcome	Expected number of Specialist Appointments
Review of management plan in patients with stable metabolic bone disease after 5 years of treatment	<ul> <li>Age ≥ 18 years old</li> <li>Vitamin D level optimized &gt; 50</li> </ul>	As above	As above	As above	As above