

Approval Required: On-Referrals for Restricted Services Pain Medicine Physicians



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Scenario 1 - Psychology

A pain medicine physician provides comprehensive pain management for a Defence member with fibromyalgia. Recognising the need for multidisciplinary care, the physician makes an on-referral to a pain psychologist. By referring the patient to a pain psychologist, the pain medicine physician ensures access to specialised psychological support and evidence-based interventions to address the psychological and emotional aspects of chronic pain management.

In this scenario, Defence approval is required because Psychology is considered a Restricted Service.



Scenario 2 - ECG

A pain medicine physician assesses a Defence member with a history of cardiac conditions and chronic pain. Considering the potential cardiovascular implications, the physician makes an on-referral for an ECG to assess the patient's cardiac function. By on-referring the patient to a Bupa network Cardiac or Pathology Lab for an ECG only, the pain medicine physician seeks to evaluate the patient's cardiac health and ensure safety during pain management interventions or medication adjustments.

In this scenario, Defence approval is not required because the ECG provided by a Bupa network provider Lab for investigation is considered a Non-Restricted Service



Scenario 3 - EEG

A pain medicine physician evaluates a Defence member who experiences chronic migraines with associated neurological symptoms. To assess the possibility of underlying epileptic activity contributing to the migraines, the physician makes an on-referral to another specialist for an EEG. By referring the Defence member for an EEG by another specialist, the pain medicine physician aims to gather additional diagnostic information to guide the management of the patient's migraines and associated symptoms.

In this scenario, Defence approval is required because the EEG was referred to another specialist and is considered a Restricted Service.