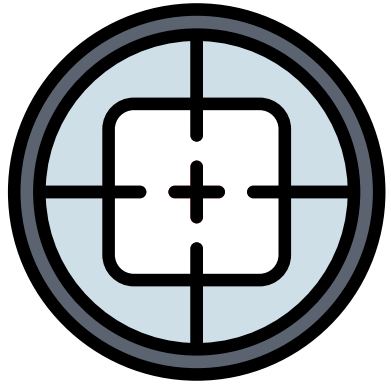


Throughout their lifespan tamariki grow and develop uniquely. An individualised whānau-centred care model that encompasses the wider support network and community will ensure tamariki reach their full future potential.



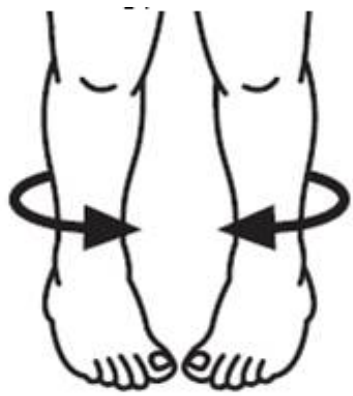
SERVICE AIM

For tamariki (children) with non-urgent musculoskeletal (MSK) conditions to be seen by the right person, in the right place at the right time.

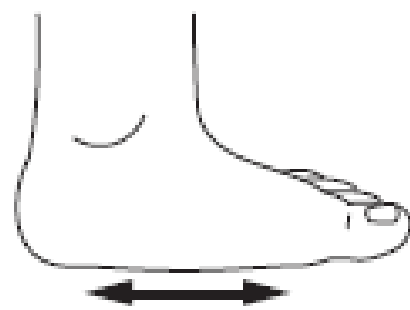
- Enable appropriate access to triage, assessment and early intervention;
- Establish equitable access to specific paediatric orthopaedic services is available across the Bay of Plenty;
- Ensure only those tamariki requiring specialist orthopaedic assessments are referred to paediatric orthopaedic specialist.

CONDITIONS SEEN IN POTS

Non-urgent, paediatric postural variants referred to secondary care for:



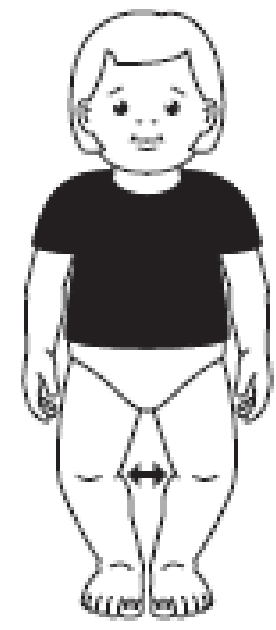
Intoeing



Flat Feet (pes planus)



Knock knees (genu valgum)



Bowlegs (genu varum)



Curly toes



Out-toeing

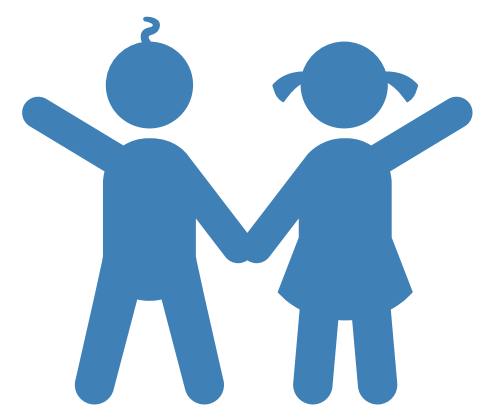


Toe walkers

Images taken from The Royal Children's Hospital Melbourne fact sheets

HOW TO REFER TO US:

- Referrers will now have the option to refer to a paediatric physiotherapist for the above conditions using the POTS referral form (via BPAC).
- The paediatric physiotherapist will identify the most appropriate management plan and consult with the orthopaedic surgeons as required.
- Patients will be seen in the POTS clinic within 4 weeks.



LOOK OUT FOR UPDATED HEALTH PATHWAYS ON THESE PAEDIATRIC CONDITIONS COMING YOUR WAY SOON!

