

# Provincial Adult Oral and Maxillofacial Surgery Referral Pathway

## About this Pathway

Referral pathways help referring providers know where to send referrals and what information to include. These guidelines were created, updated, and co-designed with primary care, specialty care and patients.



We value all feedback to improve referral pathway. Please share your comments via [Online Survey](#) or scan the QR code.

## Request Urgent Advice

(Patient may need to be seen immediately. Patients with conditions that require same day intervention and/or diagnostics but not hospitalization; not life threatening)

- Call **RAAPID**
- RAAPID North: 1-800-282-9911.
  - RAAPID South: 1-800-661-1700.

## Request Emergency Consultation

(patient NEEDS to be seen immediately)

Call **RAAPID** or send to **Emergency Department via 911** as appropriate

## Review Clinical Pathway

(for guidance on referral process, if available)

A clinical pathway may be available for your patient’s condition. Please use the information to help support care decisions:

- Provincial:
- [Provincial Head & Neck Cancer Diagnosis & Referral Pathway](#)
  - [Provincial TMJ Dysfunction Primary Care Clinical Pathway](#)
- Calgary:
- [Obstructive Sleep Apnea Primary Care Pathway](#)

If you have any questions while using a clinical pathway or if a clinical pathway is not available, reach out and seek advice.

## Request Non-Urgent Consultation

(when patient requires non-urgent referral)

**Submit a referral** as per the process below:

1. Complete a referral letter stating the reason for referral. Tip: review the [QuRE Referral/Consult Checklist](#) for high-quality referral guidelines. A [referral form](#) is also available.
2. Attach all mandatory information to the referral.
3. Fax the completed referral to the FAST (Facilitated Access to Specialized Treatment) central access and intake program as listed in the [Program Contacts section](#).

If you have questions about a previously submitted but unassigned referral, call the FAST office at 1-833-553-3278. If you have questions about an assigned referral, please contact the specialist office directly.

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Program Contacts

	North Zone	Edmonton Zone	Central Zone	Calgary Zone	South Zone
<b>Urgent Advice or Emergency Consultation</b>	RAAPID North Tel 1-800-282-9911 <a href="http://www.ahs.ca/RAAPID">www.ahs.ca/RAAPID</a>	RAAPID North Tel 1-800-282-9911 <a href="http://www.ahs.ca/RAAPID">www.ahs.ca/RAAPID</a>	RAAPID North Tel 1-800-282-9911  RAAPID South Tel 1-800-661-1700 <a href="http://www.ahs.ca/RAAPID">www.ahs.ca/RAAPID</a>	RAAPID South Tel 1-800-661-1700 <a href="http://www.ahs.ca/RAAPID">www.ahs.ca/RAAPID</a>	RAAPID South Tel 1-800-661-1700 <a href="http://www.ahs.ca/RAAPID">www.ahs.ca/RAAPID</a>
<b>Zone FAST* Team</b> and other non-urgent referral contacts	North Zone FAST Team  Tel 1-833-553-3278 ext. 1 Fax 1-833-627-7025	Edmonton Zone FAST  Tel 1-833-553-3278 ext. 2 Fax 780-409-3777	Central Zone FAST Team  Tel 1-833-553-3278 ext. 3 Fax 1-833-627-7022	Calgary Zone FAST Team  Tel 1-833-553-3278 ext. 4 Fax 1-833-627-7023	South Zone FAST Team  Tel 1-833-553-3278 ext. 5 Fax 1-833-627-7024

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GENERAL ORAL & MAXILLOFACIAL CONDITIONS			
Reason for Referral	Process	Mandatory Info (Essential investigations & timeframes)	Extra Info (If available)
Chronic TMJ Pain (>3 Months)	<ul style="list-style-type: none"><li>Refer to Clinical Pathway: <a href="#">Provincial TMJ Dysfunction Primary Care Clinical Pathway</a>.</li><li>Send referral to <b>Zone FAST Team</b>.</li></ul>	<ul style="list-style-type: none"><li>MRI ordered (MRI TMJ open and closed mouth views)</li></ul>	<ul style="list-style-type: none"><li>Some treatments may not be covered through Alberta Health Care Insurance (i.e., dental fees)</li></ul>
Obstructive Sleep Apnea <ul style="list-style-type: none"><li>for surgical consideration</li></ul>	<ul style="list-style-type: none"><li>Send referral to <b>Zone FAST Team</b>.</li></ul>	<ul style="list-style-type: none"><li>Sleep Study showing moderate to severe findings</li></ul>	<ul style="list-style-type: none"><li>Some treatments may not be covered through Alberta Health Care Insurance (i.e., dental fees)</li></ul>
Facial Deformity	<ul style="list-style-type: none"><li>Send referral to <b>Zone FAST Team</b>.</li></ul>		<ul style="list-style-type: none"><li>CT Facial Bones</li><li>Some treatments may not be covered through Alberta Health Care Insurance (i.e., dental fees)</li></ul>
Cleft Palate	<ul style="list-style-type: none"><li>Send referral to <b>Zone FAST Team</b>.</li></ul>		<ul style="list-style-type: none"><li>Some treatments may not be covered through Alberta Health Care Insurance (i.e., dental fees)</li></ul>
Suspected Benign Mouth And Jaw Lesions	<ul style="list-style-type: none"><li>All Zones: Send referral to <b>Zone FAST Team</b>.</li><li>Any suspicion of cancer, go to the Suspected <a href="#">Head and Neck Cancer</a> section of the pathway.</li></ul>		<ul style="list-style-type: none"><li>*Clinical photo</li></ul> <p>Some treatments may not be covered through Alberta Health Care Insurance (i.e., dental fees)</p>

GENERAL ORAL & MAXILLOFACIAL CONDITIONS			
Consult For Oral Maxillofacial Surgery (Other)	<ul style="list-style-type: none"><li>Send referral to <b>Zone FAST Team</b>.</li></ul>		<ul style="list-style-type: none"><li>Some treatments may not be covered through Alberta Health Care Insurance (i.e., dental fees)</li></ul>

\* Clinical photos can be submitted via eReferral on Netcare. Encrypted clinical photos can also be emailed to FAST using AHS email or encrypted email. FAST email addresses (see next page for e-mail addresses)

SUSPECTED HEAD AND NECK CANCER

Category information taken from the Provincial Head & Neck Cancer Diagnosis & Referral Pathway  
[Provincial Head & Neck Cancer Diagnosis & Referral Pathway \(albertahealthservices.ca\)](#)

Please follow this pathway **PRIOR** to sending in a referral. Refer when patient has physical exam finding(s) and/or symptom(s) that have lasted longer than 3 weeks despite management; or the patient has prior suspicious imaging. Note: for confirmed oral lesion, refer immediately.

Reason for Referral	Process	Mandatory Info (Essential investigations & timeframes)	Extra Info (If available)
<p><b>Suspected Head and Neck Cancer</b></p> <ul style="list-style-type: none"><li>Oral persistent mass or ulcer</li></ul>	<ul style="list-style-type: none"><li>Send referral to <b>Zone FAST Team</b>.</li><li>All other suspected head and neck cancer conditions, refer to <a href="#">Provincial Head &amp; Neck Cancer Diagnosis &amp; Referral Pathway</a>.</li></ul>		<ul style="list-style-type: none"><li>CT neck ordered with contrast (indicate ordered in referral letter) but <b>do not</b> delay referral while waiting for CT scan</li><li>*Clinical photo</li><li>Some treatments may not be covered through Alberta Health Care Insurance (i.e., dental fees)</li></ul>

\* Clinical photos can be submitted via eReferral on Netcare. Encrypted clinical photos can also be emailed to FAST using AHS email or encrypted email. FAST email addresses:  
South zone: [ABFAST.South@ahs.ca](mailto:ABFAST.South@ahs.ca)    Calgary zone: [ABFAST.Calgary@ahs.ca](mailto:ABFAST.Calgary@ahs.ca)    Central zone: [ABFAST.Central@ahs.ca](mailto:ABFAST.Central@ahs.ca)  
Edmonton zone: [ABFAST.Edmonton@ahs.ca](mailto:ABFAST.Edmonton@ahs.ca)    North zone: [ABFAST.North@ahs.ca](mailto:ABFAST.North@ahs.ca)