



Dear General Practitioner,

Re: nonorganic enuresis (F98-ICD-10)*
Better Access Mental Health Care Plan request

I write to request a medical consultation and evaluation of this child's bedwetting. If you feel it is appropriate, would you please consider writing a referral letter and prescribing an item 2715 or 2717 (or a 2700/2701) Mental Health Care Plan for the childhood disorder 'nonorganic enuresis' in accordance with the disorders treatable under the 'Better Access' Scheme. Nonorganic enuresis is considered, in and of itself a mental health condition in the ICD-10*. I request this referral with the aim of achieving the following outcomes:

- Stop night time bed wetting

The Ramsey Coote bell and pad alarm system is combined with weekly psychologist sessions, to achieve overnight dryness in approximately six to eight weeks. The bell and pad alarm is a 'behavioural' program, and is thus an evidence based treatment which, as you are aware, is generally regarded first line response to bedwetting. The parent has requested the approach as it is a drug-free, longer-term solution.

After you have made your medical assessment, if a Mental Health Care Plan and referral to the clinic is appropriate, please use the details below to make out the referral and the Mental Health Care Plan and ensure that the client has a copy of their referral letter and MHCP to receive the rebated sessions.

I would be very pleased to speak with you should you wish to discuss this request further on 0413 255 451 or on info@drytimekids.com.au.

Sincerely,

Maria Dhroso
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*The conditions classified as mental disorders for the purposes of the better access to mental health care are informed by the world health organization ICD-10 Chapter V Primary Care Version. F98.0 Nonorganic enuresis is under "Other behavioral and emotional disorders with onset usually occurring in childhood and adolescence"