Urgent Neurology Clinic Referral Form

Victoria Hospital, Zone E, Level 5
Fax completed form back to 519-667-6766. **Incomplete forms will be returned.**

A. Does your patient have: An urgent neurological problem needing assessment within 3 to 5 working days of referral?
Focal neurologic deficits or high suspicion of a sinister neurologic process? Complete Part 1.
B. Does your patient have: A subacute, stable or chronic neurological problem (e.g. migraine, dementia)? Have they been seen by a neurologist for this problem? Is this a medico-legal issue or concussion? **Go to Part 2 for suggestions as this is not an appropriate referral to the Urgent Neurology Clinic.**

Part 1

Working Diagnosis:

Date of Onset:

History of Presenting Illness:

Relevant Medical History:

Medications (or attach list):

Neurologic Exam Select normal (N) or describe objective findings:

Cranial Nerves: ☐ N

Speech: ☐ N

Language: ☐ N

Motor: ☐ N

Reflexes: ☐ N

Sensory: ☐ N

Cerebellar: ☐ N

Gait: ☐ N

Investigations (List with results):

Date of Referral:

Referring Doctor of Medicine (MD):

OHIP Number:

Referring MD Phone Number:

Referring MD Fax Number:

Referring MD Email:

Family Physician:

☐ Same as referring or

Consider reassessment by family doctor first (e.g. patients with normal neuro exam or resolved symptoms).

Part 2

Suggestions for SUBACUTE, NON-URGENT PRESENTATIONS:

1. If you wish advice regarding non-urgent referrals
    a. Call the LHSC switchboard at 519-685-8500, between 0830 and 1630 hours, and ask for the neurology consultant on call at Victoria Hospital
    b. Consider utilizing the province's e-consults service
    c. Indicate that if declined, the referring physician would agree to receiving e-consult advice
2. Referral to Community General Neurologist
3. Refer back to neurologist who has previously seen patient.
4. If concussion – refer to Parkwood Brain Injury or appropriate specialist for symptom management.
5. If radiculopathy - refer to EMG Clinic.
6. If new seizures - refer to First Seizure Clinic.

Appropriate for Urgent Neurology Clinic

- Less than 3 months.
- Progressive symptoms.
- IIH with confirmed papilledema.
- Cranial nerve palsies.
- Acute progressive limb weakness.
- Headache with red flags.
- Transient Global Amnesia.

Not Appropriate for Urgent Neurology Clinic

- Normal pressure hydrocephalus.
- Movement disorders.
- Cognitive decline/confusion.
- Concussion or post concussive syndrome.
- Migraine.
- Radiculopathy.
- Pediatrics.
- Unprovoked seizures.