

All patients referred will be registered at UCLH and communications between GP and neurologist will be recorded in a new or existing hospital record in the usual way.

Instructions for GP's

Explain and agree the referral with the patient:

Instead of saying to the patient, “**I will refer you to a neurologist**” you need to say, “**If you wish I could seek a neurological opinion by email from The National Hospital for Neurology UCLH.** On agreement fill in the Referral Template with *ALL* of the following details:

D.O B , Demographics and Health Care Number, this is essential to create or identify hospital records, make appointments or order tests

Main symptom: this is obviously the important bit and the chronology of onset is really useful in making a diagnosis.

Previous Neurological Attendances: really important to understand history and avoid duplication of tests.

Examination: You will need to describe any abnormalities identified on completion of a short neurological examination which covers eye movements, visual fields, face, arm and leg strength (deltoids, finger abductors, hip flexors, ankle dorsiflexors), tendon reflexes, plantars, finger-nose and heel-shin tests, and gait, see video link for a 4 minute guide to Neuro Examination

Fundi : You need to record specifically about the presence or absence of papilloedema.

http://www.ion.ucl.ac.uk/Neuro_Mail_A_GP_Guide_to_a_Short_Neuro_Examination.mpg

Referral Question: Please specify the information you require.

The neurology reply may consist of:

Advice only i.e. no appt required and management by e-mail only

Advice and arrange tests i.e. bloods by GP pre-appt and neurologists book tests in hospital

Arrange OPD appointment and pre-book tests as necessary

Neuromail should not be used to seek an urgent opinion.

The opinion given is based on the information received.

The National Hospital for Neurology & Neurosurgery

Queen Square
London
WC1N 3BG

Telephone: 0845 155 5000

Direct Line: 0207 6762083

Web-site: www.uclh.nhs.uk

Fax: 0207 6762084

The responsibility for the patients care pathway remains with the GP at all times

Neurology email referral:

Date:

GP Practice and referring GP:

Patient details:

Name:

Sex:

DOB:

UCLH number if registered

History:

Examination findings:

Record specifically the presence or absence of papilloedema.

Referral question:

Neurologists Reply

Date

Name

Opinion:

This reply is based solely on the information provided