



REFERRAL GUIDELINES

Neurology Clinic

Head of Unit **Dr Ernie Butler**

Referrals Referral addressed to named head of unit is preferred.

E-referral using the GP Referral Template located within the Mastercare Referralnet system is preferred. Fax Referrals to :**9788 1879**.

Please Note: The referral should not be given to the patient to arrange an appointment. No appointments can be made over the phone. Once a referral has been received, the patient is notified by mail of the date and time of their appointment.

Clinic overview :

To assess and/or manage patients with serious neurological conditions

Minimum Referral Information Required:

- Referring practitioner name, provider number and signature.
- Date of referral
- Patient's name, address, date of birth, Medicare number and phone number.
- Clinical details and reason for referral including symptomatic history, possible diagnosis and/or injury
- Relevant medical history
- Medications
- Allergies
- Results of all recent and relevant investigation

Please see statewide criteria link below:

<https://src.health.vic.gov.au/specialities>

Categories for Appointment

	Clinical Description	Timeframe
Emergency	<ul style="list-style-type: none"> • Rapidly progressive neurological symptoms • Please see statewide referral criteria for details on emergency conditions for Headache, Epilepsy & Seizures, Motor weakness ,Movement Disorder ,Stroke and Vertigo <p><u>Seizure with:</u></p> <ul style="list-style-type: none"> • focal deficit post-ictally • seizure associated with recent trauma • persistent severe headache > 1 hour post-ictally 	Immediately via Emergency Department

IMPORTANT:

The following referral information is mandatory:

Referral:

- Date of referral
- Speciality
- Referring practitioner name
- Provider Number
- Referrer's signature

Patient Demographic:

- Full name
- Date of birth
- Postal address
- Contact numbers
- Medicare Number
- Interpreter required

Clinical:

- Reason for referral
- Duration of symptoms
- Management to date
- Past medical history
- Current medications
- Allergies
- Diagnostics as per referral guidelines

Preferred:

- Addressed to named practitioner
- Duration of referral (if different to standard referral validity)
- Email address
- Next of kin

HEAD OF UNIT
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<ul style="list-style-type: none">• Seizure with fever• Prolonged or recurrent seizure (more than one in 24 hours) with incomplete recovery• Persisting altered level of consciousness. <p><u>Headache with:</u></p> <ul style="list-style-type: none">• Sudden onset or thunderclap headache• Severe headache with signs of systemic illness (fever, neck stiffness, vomiting, confusion, drowsiness, dehydration)• Severe disabling headache• Severe headache associated with recent head trauma. <p><u>Headache suggesting temporal arteritis:</u></p> <ul style="list-style-type: none">• (focal neurological symptoms, altered vision, elevated erythrocyte sedimentation rate and C -reactive protein in patients > 50 years of age). <p><u>Rapidly progressive neurological symptoms leading to weakness or imbalance.</u></p> <ul style="list-style-type: none">• Acute onset of a movement disorder e.g. severe ataxia, dystonia, hemiballismus• Acute dystonic crisis• Acute akinetic crisis• Neuroleptic malignant syndrome• Device-related infection in people with deep brain stimulator implants. <p><u>Transient ischaemic attack(s)</u></p> <ul style="list-style-type: none">• In last 48 hours• Multiple or recurrent transient ischaemic attack episodes in the last seven days• Amaurosis fugax in last 48 hours• Persistent neurological deficit. <p><u>Vertigo</u></p> <ul style="list-style-type: none">• Sudden onset debilitating vertigo where the patient is unsteady on their feet or unable to walk without assistance• Sudden onset vertigo with other neurological signs or symptoms(e.g. dysphasia, hemiparesis, diplopia, facial weakness)• Barotrauma with sudden onset of vertigo	<p>Immediately via Emergency Department</p>
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Category 1 Urgent	Urgent symptoms must be discussed with the Neurology Registrar by calling switchboard on 9784 7777	Within 30 days
Category 2 Routine	All other cases	Up to 3 months/ Next Available

Eligibility Criteria

Peninsula Health Catchment preferred

Adults with serious neurological disorders such as:

- Multiple Sclerosis
- Epilepsy
- Movement Disorders
- Peripheral Neuropathy
- Frequent blackouts
- Trigeminal neuralgia
- Undiagnosed neurological disorders
- Planning for pregnancy or pregnancy with epilepsy.

Benchmark with DHHS Statewide Referral Criteria if appropriate

- Epilepsy & Seizures
<https://src.health.vic.gov.au/epilepsy-and-seizures>
- Motor weakness or paraesthesia
<https://src.health.vic.gov.au/motor-weakness-or-paraesthesia>
- Vertigo
<https://src.health.vic.gov.au/vertigo-neurology>

Exclusions

- Stroke
- Children under 16 years
- Patients requiring immediate neurological attention

Benchmark with DHHS Statewide Referral criteria if appropriate

- Headache
<https://src.health.vic.gov.au/headache>

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Alternative referral options

- TIA Clinic Peninsula Health
- Movement Disorders Program Peninsula Health
- Monash Health Neurology Department
- Private services

Clinic information

Tuesdays 1330 - 1630

Outpatient Department, Frankston Hospital – Integrated Health Centre

- The referral will be triaged by the consultant prior to the patient being contacted by Outpatients staff with appointment details.
- All patients require a referral from a Specialist or General Practitioner.
- We aim to see patients within the above timeframes; however, due to the high demand the wait times maybe significantly longer.

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