



# WHERE DOES MY NEURO PATIENT GO?

Decision tool for referring potential Neurology patients



A complete Neurological exam is crucial for the triaging process.



**Complete History, Physical and Neurological Exam**



**Symptom Type / Duration / Progression?**

**SPC**

**Stroke Prevention Clinic**



- TIA
- Focal neurological symptoms
- Amaurosis fugax
- Asymptomatic carotid artery stenosis

**UNC**



**Urgent Neurology Clinic**

Please provide the patient with the Urgent Neurology Clinic information handout, QR code or website URL.

**< 3 months, rapid progression**



**Inclusions**

**UNC Website**

- First seizure
- Transient global amnesia
- Weakness (objective finding, focal)
- Binocular visual changes (neurological: diplopia, homonymous hemianopia, etc.)
- Bulbar symptoms (dysarthria, dysphagia)
- Aphasia
- Worrisome headaches (with new neurological findings)
- Focal neurological deficits
- New neurological symptoms in a pregnant or immunocompromised person

**NCAT**



**Neurology Central Access and Triage**

**> 3 months, consistent progression**

All Neurology referrals should go through NCAT

**Questions?**  
**SpecialistLink.ca**



All referrals are made by the medical home / primary care provider when possible.



**Non-Neurology Specialty Referral / Exclusions**

- Neurosurgery
- Spine
- Ophthalmology (monocular vision changes)
- Brain Injury Program (for concussion & brain injury)
- Bell's Palsy
- Vertigo (see pathway)
- Temporal arteritis (Plastics AND Int. Med. / Rheumatology)

More information: [www.ucalgary.ca/dcns/UNC](http://www.ucalgary.ca/dcns/UNC)  
ARD (Alberta Referral Directory) "Urgent Neurology"