

### Epilepsy & First Seizure Clinics

#### RAH Campus

Phone: 1300 153 853

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- **Dr Michelle Kiley** (Fri am)
- **Dr Martin Robinson** (Fri am)
- **Ms Sharon Horn**  
(Epilepsy Nurse Practitioner)  
Tues pm, Thurs pm
- **Epilepsy Fellow/Registrar**  
(Fri am)

#### TQEH Campus

Phone: (08) 8222 6239

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- **Dr Martin Robinson**  
(Mon am)
- **Dr Craig Kurunawai**  
(Wed am)
- **Neurology Registrar**  
(Wed am)
- **Ms Sharon Horn**  
(Epilepsy Nurse Practitioner)  
Mon – Thurs am

**NOTE:** If you are referring to First Seizure Clinic from within an EPAS active SA Health site, you may also refer via Orders by selecting ‘Consult – Epilepsy Nurse’.

#### Referral Criteria

Appropriate referrals include patients with:

1. Strongly suspected new onset seizure disorder where the event is witnessed and/or there are features highly suggestive of seizure which does not meet any of the exclusion criteria below
2. Patients with known epilepsy requiring ongoing shared management of refractory epilepsy
3. Patients with known epilepsy for consideration of epilepsy surgery or vagal nerve stimulator insertion
4. Patients with known epilepsy in the setting of planned or current pregnancy
5. Patients requiring video EEG monitoring for diagnostic uncertainty or seizure classification
6. Patients with previous seizure requiring specialist assessment for the purposes of obtaining a **commercial** drivers’ licence (Note: private drivers’ licences usually do not require specialist assessment. See [Assessing Fitness to Drive guidelines](#) for more information)
7. Patients with known epilepsy wishing to withdraw anticonvulsant medication
8. Patients with recent hospital admission for new onset seizures where specific epilepsy outpatient follow-up is required for ongoing diagnostic and/or management issues

Conditions which are **not** assessed by Epilepsy/First Seizure Clinics include:

1. Seizures occurring in the setting of drug and/or alcohol intoxication or withdrawal
2. Acute symptomatic seizures i.e. occurring in the setting of severe systemic illness, severe metabolic disturbance or concussion
3. Unconscious collapse where no available collateral history or no features to strongly suggest seizure disorder
4. Convulsive syncope
5. Assessment primarily for the purposes of private drivers’ licence renewal (this can be done using the [Assessing Fitness to Drive guidelines](#) by the patient’s treating doctor, including their general practitioner)
6. Seizures where diagnosis and investigations already complete +/- therapy commenced
7. Patients with confirmed diagnosis of functional/psychogenic non-epileptic seizures
8. Seizures occurring in the setting of advanced dementia

#### **NOTE: Assessment for driving in patients with epilepsy or seizures**

Once a person has had a single seizure or black out of undetermined cause there are mandatory driving restrictions which are generally not negotiable and exemptions to this are rare regardless of neurologist review. Please ensure you review these guidelines prior to discussing driving restrictions with your patients to avoid disappointment when their neurologist does not waive this restriction.

This is a minimum restriction of:

- 6 months for a private licence
- 5 years for a commercial licence

Applications for conditional licencing for private vehicles are able to be completed by the treating doctor, which includes the patient’s general practitioner. For more information see the [Assessing Fitness to Drive guidelines](#).