

Neurology Department

The Neurology department provides a consultative service for all neurological conditions and neurophysiology diagnostic testing including nerve conduction studies (NCS), electromyography (EMG), electroencephalogram (EEG) and evoked potentials.

Referral guidelines have been developed for some common neurology referrals including

- [Headaches](#)
- [Seizures](#)
- [Neuropathy](#)
- [Tremor](#)
- [Vertigo](#)

Please forward a referral **addressed to your preferred neurologist** using the departmental referral forms.

Services provided

1. Sub-specialty clinics:
 - Epilepsy
 - Movement disorders/Parkinson's
 - Multiple sclerosis/Neuroimmunology
 - Motor neurone disease (RGH)
 - Huntington's/Sub acute and young onset cognitive impairment
 - TIA
2. General Neurology clinics:
 - Referrals not fitting the above sub-specialty services
3. Neurophysiology diagnostic services
 - Electroencephalography (EEG)
 - Nerve conduction studies (NCS) / Electromyography (EMG)
 - Evoked potentials

Services not provided – assessment of:

- Syncope
- Chronic cognitive impairment
- Chronic pain syndromes
- Chronic back pain
- Substance abuse related seizures
- Confirmed psychogenic non-epileptic seizures
- Routine review of non-complex conditions for determination of fitness to drive

For urgent advice in business hours contact the Neurology Registrar via
Flinders Medical Centre **Ph: 8204 5511**

Triage Criteria for Referral

Category 1
Target < 2 month
Current < 8 month

Category 2
Target < 6 months
Current < 2 years

Category 3
Target < 12 months
Current > 2 years

Version	Date from	Date to	Amendment	Author
2.0	June 2015	June 2017	Addition of Parkinson Management Guideline	A/Prof Mark Slee. Regional Head Neurology, SALHN.
3.0	October 2018	October 2020	Removal of RGH details	Dr D Schultz, Head of Unit, Neurology, SALHN
4.0	October 2019	October 2021	Addition of Huntington's & Cognitive Management Guidelines	Dr D Schultz, Head of Unit, Neurology, SALHN

<ul style="list-style-type: none"> • First seizure (unprovoked) • New onset Parkinsonism • New onset MS • Suspected MND • Suspected IIH • Cluster headaches • Subacute spinal cord syndrome(if acute send to ED) 	<ul style="list-style-type: none"> • Chronic epilepsy • Established PD diagnosis • Disabling tremor • Established MS diagnosis • Subacute neuropathy • Migraine – non responsive to first line therapy • Non-specific imaging abnormalities • Suspected myopathy 	<ul style="list-style-type: none"> • Substance abuse related seizures • Funny turns • Non-specific sensory symptoms • Chronic headache • Chronic vertigo
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General Information to assist with referrals and the and Referral templates are available to download from the SALHN Outpatient Services website www.sahealth.sa.gov.au/SALHNoutpatients