Neurosurgery referral guidelines

Director of Department: Dr Teresa Withers

Specialist advice service: If you have a de-identified clinical question that may help with your management prior to a referral you can contact the neurosurgery dept on: GCUH.ask.a.neurosurgeon@health.qld.gov.au or ask via GP Referral Template stating “For Advice only”

Please contact Neurosurgical registrar on-call if you need urgent advice via GCUH switchboard: (07) 5687 0003

When considering a Neurosurgical referral, particularly when surgery is the likely outcome, it is important to consider some basic issues such as:

1. Firstly, does the patient want an operation?
2. Have all other options been exhausted prior to referral to an Neurosurgical surgeon?
3. Is the patient fit for surgery and have any chronic health issues been optimised?
4. Is the patient available for surgery?
5. Lastly, has the patient had back or neck pain for more than 8 weeks?

Minimum information required in all Neurosurgical referrals

The clinical information and pre-requisite investigations requirements are currently found on GP referral templates for all GP software programs, the latest of which can be found at http://www.gpgc.com.au/cmsItem.aspx?CK=187.

If the clinical information or pre-requisite investigations are not clearly provided, your referral may be returned to you asking for more information.

Clinical information

To safely categorise/prioritise your patient, the Neurosurgical department needs the following information as a minimum to be clearly provided in every referral:

1. Reason for referral
2. Has the patient been seen by a GCHHS consultant in this specialty in the past?
   a. If yes, provide GCHHS consultant’s name
3. Duration of problem (e.g. days, weeks etc.)
4. Examination findings
5. Treatment to date (e.g. what medication has previously been tried for this spinal problem eg analgesia, physiotherapy – please provide details from the treating clinician if possible)
6. List any red flags
Pre-requisite investigations required

Please only send investigations relevant to the treating clinician (as requested).

Please ensure as much clinical information including any red flags and pre-requisite investigations are provided in the referral to enable the neurosurgeons to safely prioritise your patient.

Current clinics at Gold Coast Health:

- Neurosurgical Clinic
- Neurosurgical Screening Clinic (NSC) run by an advanced physiotherapist in liaison with neurosurgeons

Services not provided by Gold Coast Health

- Scoliosis - Refer to Princess Alexandra Hospital
- Paraplegia/Quadriplegia – Refer to Spinal Unit, Princess Alexandra Hospital

Services provided (click to navigate to area)

**Back Pain**

**Neck, Shoulder or Arm Pain**

**Confusion, Severe Headaches**

### Back Pain

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Evaluation</th>
<th>Management</th>
<th>When to refer</th>
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<tbody>
<tr>
<td>Lower back pain &amp; sciatica</td>
<td>Provide details of any RED FLAGS in referral neurological examination examination <a href="#">Examination Guideline</a></td>
<td>See flow diagram below. <a href="#">Back Pain Patient Resources</a></td>
<td>Please follow diagram below. 80% of simple back pain recovers within 8 weeks. <strong>Please list any red flags &amp; results in referral.</strong></td>
</tr>
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Back Pain Guidelines

Cauda Equina
Saddle anaesthesia
Neurological deficit
Bowel/bladder symptoms

Back Pain + Red Flags
CT or MRI lumbar spine
**Bloods**- FBC, U&Es, CRP, ESR, LFTs, autoantibodies
If appropriate - Cancer markers, Chest/Abdomen CT

Back pain, Radiculopathy or Claudication
Initially Supportive Therapies:
- Analgesia
- Gentle Exercise
- Physiotherapy
- Heat/gentle massage
- Acupuncture

If not improving within 8 wks then:
CT or MRI, NCS and bloods

REFER IMMEDIATELY to Neurosurgical Registrar reached through GCUH switch (07 5687 0003)

Red Flags
- Age (at onset) <16 or >55
- Motor deficit eg foot drop
- Recent significant trauma
- Unexplained weight loss (PTO)
- History of cancer
- History of IV drug use
- Prolonged use of corticosteroids
- Severe night pain
- Fever

If pathology identified:
- refer for **URGENT** appt
- If NO pathology:
  - reassess pain relief & provide supportive therapies

Consider asking specialist advice via email:
**GCUH.ask.a.neurosurgeon@health.qld.gov.au**

Or in GP Referral Template stating “FOR ADVICE ONLY”

Otherwise - Non-urgent Referral to Neurosurgery with results & treatment to date
# Neck, Arm & Shoulder Pain

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<tr>
<td>Neck pain and arm pain (should radiate down arm)</td>
<td>Plain cervical spine films, CT neck, FBC, U&amp;E’s, LFT, Rheumatoid factor, ESR, autoantibodies</td>
<td>Analgesia</td>
<td>If motor neurological deficit - URGENT referral</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Gentle Exercise</td>
<td>70-80% of patients will settle within 8-12 weeks. If persistent beyond this - non-urgent referral</td>
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<td></td>
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<td>Physiotherapy</td>
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<td></td>
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<td>Heat/gentle massage</td>
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<td></td>
<td>Consider Nerve Conduction studies</td>
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<tr>
<td>Shoulder pain</td>
<td>X-Ray shoulder and ultrasound</td>
<td>Consider ultrasound guided cortisone injection if appropriate</td>
<td>Refer to orthopaedics if doesn’t settle</td>
</tr>
<tr>
<td>Spinal pain &amp; history of malignancy</td>
<td>Bone Scan, CXR, CT of painful region of spine (cervical, thoracic or lumbar)</td>
<td></td>
<td>URGENT REFERRAL</td>
</tr>
<tr>
<td>Carpal Tunnel compression and Ulnar nerve compression</td>
<td>Nerve conduction studies (NCS)</td>
<td>Can trial night splinting of wrist</td>
<td>If NCS positive non – urgent referral If negative- re-assess</td>
</tr>
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## Confusion, other neurological deficits or severe headaches

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<td>Confusion or other neurological deficit</td>
<td>FBC, U&amp;E’s, LFTS’s, COAG profile, CT head scan – plain and with contrast. Consider EEG</td>
<td>Correct abnormalities that you can. Consider other causes (eg medical) of confusion</td>
<td>Refer to appropriate unit depending on results</td>
</tr>
<tr>
<td>Severe headaches</td>
<td>FBC, U&amp;E’s, LFT’s, ESR, CT head scan – plain and with contrast</td>
<td>If CT normal – consider MRI</td>
<td>Refer to appropriate unit based on results</td>
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Useful patient resources

**Back Pain Patient Resources** A number of resources available for patients on back pain.

**Patient.co.uk - Back Pain** non-specific back pain patient information from UK

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