

**GUIDELINES FOR NEUROLOGICAL TELEMEDICINE CONSULTATIONS**

**LEGEND: N = NEUROLOGY NS= NEUROSURGERY**

Level 1	Level 2	Level 3	Level 4
<b>EMERGENT</b> Consult Response Target - within 15 minutes	<b>URGENT</b> Consult Response target: within 60 minutes	Consult Response target: within 2 - 6 hours	Consult Response Target: Within 24 hours
<b>N – Ischemic Stroke (No CT bleed)</b> Sudden onset aphasia, hemiparesis, gaze deviation, dysphagia, inability to walk, major cognitive change. Last Known Well - IV TPA (4.5 hours);endovascular (8 hours)		<b>N – Subacute Stroke</b> with moderate deficits	<b>N – Subacute/Chronic Stroke</b> with mild deficits
<b>N – Acute Visual Loss</b>			
	<b>N – New Onset Confusion</b> and/or significant cognitive changes		
	<b>N/NS – Acute Altered Consciousness; GCS &lt; 8</b>	<b>N – Acute Paralysis</b> , non- trauma (airway secured)	
	<b>N – Suspected Meningitis, Encephalitis</b>		
<b>N – Status Epilepticus, Uncontrolled seizures</b> Any seizures lasting > 5 minutes and refractory to initial AEDS		<b>N - *2 or more seizures in 24 hours or *first seizure (negative associated history)</b>	<b>N – First Seizure</b> (positive factors i.e. drug abuse, ETOH/Withdrawal, resolves on own)
<b>NS – Suspected SAH/ICH (CT bleed)</b> Sudden severe, “thunderclap” headache; may indicate aneurysmal subarachnoid hemorrhage, intracerebral hemorrhage. New onset, severe headache, esp. patients > 50 years with neurological changes.		<b>N – Severe Headache;</b> + migraine history	
<b>NS – Severe Head Trauma</b> (size, location, age); * <b>GCS 3 -8</b>	<b>NS – Moderate Head Trauma</b> , minor traumatic SAH; * <b>GCS 9 -12</b>	<b>N/NS – Mild Head Injury/Concussion</b> * <b>GCS 13 -15</b>	
	<b>NS – Spine Trauma</b> with suspected fractures		
		<b>NS – Back or Neck Pain</b> , pain, focal weakness, previous back surgery	
		<b>NS – Seizure</b> with finding of brain tumor	
			<b>N - New onset acute</b> gait deterioration, neurological symptom - limb weakness, cranial nerve signs (do not suspect stroke/TIA)
			<b>N/NS - Follow up</b> on admitted neuro telemedicine patient for treatment clarification, questions
			<b>N - Neuro Routine Consult</b> - not emergency but need prompt advice from a neurologist