

Example of a neurosurgical referral form

Referring Hospital:
 Name: _____
 Address: _____

ID LABEL

Consultant
 Sex: Male Female
 Age: _____
 DOB: _____

NEUROSURGICAL CHECK LIST and REFERRAL FORM

ED Ward Consultant: _____
 Date of Incident: ___ / ___ / ___ Time of Incident: ___ : ___

History:

✓ = Normal
 ↓ = Diminished
 ↓↓ = Absent

Physiological Observations

	Time	O ₂ sat	RR	HR	BP	GCS			Limb Movement				RIGHT Pupil		LEFT Pupil	
						eye	motor	verbal	ARMS		LEGS		reacts	size	reacts	size
									R	L	R	L				
on arrival																
on transfer																

CT Scan at referring hospital: No Yes Cranial Injuries:

Extra-cranial injuries (proven or suspected)

C-spine:	Cleared <input type="checkbox"/>	Controlled <input type="checkbox"/>	Chest:	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Pelvis	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Abdomen:	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Thoracolumbar:	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Face/Neck:	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Limbs:	No <input type="checkbox"/>	Yes <input type="checkbox"/>			
Other:	No <input type="checkbox"/>	Yes <input type="checkbox"/>			

Past Medical History:

Current Medication: Warfarin: Other:

Allergies: No Yes

Interventions

Airway: Patent: Intubated Other
 Ventilation: Spontaneous IPPV FiO₂ _____ %
 Urinary catheter: Yes No Urinalysis:

Drugs given	Dose	Time
Tetanus immunoglobulin		
Tetanus toxoid		

Drugs given	Dose	Time

IV Fluids	Volume (cc)
crystalloid	
colloid	
blood	

Blood Tests

Time:			
pO ₂			
pCO ₂			
H ⁺			
HCO ₃			

Hb	Na ⁺	PT	
WCC	K ⁺	APTT	
Platelets	Urea	TCT	
Glucose	Creat.	X-match	

Next of kin _____ Valuable: patient relatives police none

NB: Have you excluded all possible sites of blood loss?

Transfer with the patient: Observation charts Medical notes X-rays CT Scan

Receiving Neurosurgeon: _____ Referral Time: ___ : ___ Accepted: ___ : ___ Transfer: ___ : ___

Signed: _____ Print: _____ Grade: _____ Date: ___ / ___ / ___