

URGENT REFERRAL – ACT IMMEDIATELY

For all suspected TIAs

ENSURE ALL ACTIONS HAVE BEEN COMPLETED AND COMPLETE REFERRAL IMMEDIATELY USING THE TIA FORM ON SystemOne and EMIS

Manage all suspected TIA's as high risk unless the event was >1 week ago

- Inform patients they should expect to be seen at the hospital within 24 hours (high risk) or 7 days (low risk) and must be available to attend.
- Inform patients they must not drive for one month after a TIA.
- Check patient has transport, if no transport available arrange via ambulance service.
- Inform patients to call 999 if symptoms suggesting stroke occur.
- Ensure you provide an up to date contact number for the patient for the next 24 hours (confirm with the patient, do not take from records).
- Ensure the patient is prescribed appropriate antiplatelet medication unless on anticoagulants. Give Aspirin 300mg immediately for suspected TIA, then Clopidogrel 75mg daily (unless on anticoagulants)
- Patients with suspected acute stroke (FAST positive) should be sent to hospital as an emergency.
- For referral advice contact Dr Brotheridge via hospital switchboard in office hours.

REFERRAL PATHWAY

High Risk patients

- **Monday 08.00 – Friday 16.00:** e-RS referral **urgently (same day)**
- **Friday 16.00 - Monday 08.00:** inform the patient to attend CATT ward @ 10.00 the same/ following day and ask patient to bring referral with them – inform the ward clerk or nurse in charge of CATT.
- **Bank holidays :** as above.

Low Risk patients

- **All times:** e-RS referral **urgently (same day)**