|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FIRST FIT CLINIC**  **REFERRAL FORM**  For GP Referrals please attach to eRS.  For non-GP Referrals please e-mail to the following address with ‘First Fit’ in the title.  **Email:** stgh-tr.Neuro@nhs.net  **Tel:** 0208 725 4321 | **SOURCE OF REFERRAL** (please circle):   |  |  |  |  | | --- | --- | --- | --- | | GP | A&E | MAU | Other |   **Name of referrer and contact phone number:**  **SGH Consultant code: \_\_ \_\_ \_\_**  **Date and time of referral:**  Date\_\_ /\_\_ /\_\_: time \_\_ : \_\_ (24h clock) | |
| **GP STAMP** (name and address) |
| **PATIENT DETAILS**  **Name:**  **NHS Number:**  **Gender:**  **D.O.B:**  **Address:**  **Tel. No:**  **Next of kin/carer:**  **NOK/Carer Tel. No:** | **For seizures or unclear blackouts where seizures cannot be excluded as differential diagnosis (the latter might be referred to arrhythmia clinic, cardiology at same time)**  **Yes No**   * Above 16 years old? 🞏 🞏 * New onset seizures/blackouts within last 12 month? 🞏 🞏 * Latest seizure/blackout within last 3 month? 🞏 🞏 * Not started on anti-epileptic drugs? 🞏 🞏   Refer only for rapid access first fit clinic if all above are yes.   * Sheldon’s Questionnaire ≥1 (see bottom of form) 🞏 🞏 | |
| **Handed** Left / Right  **Preferred language?**  **Interpreter required?** Yes / No | **Is Hospital transport required? Yes / No**  **Type required Car**  **Ambulance** | |
| **Summary presenting event,  past medical history and relevant family history:** | | **Current Drug Therapy:** |
| **Witnesses to event(s):** PLEASE ASK ANY WITNESS(ES) TO COME WITH PATIENT TO CLINIC;  Provide contact details here if this may not be possible: |
| |  |  |  | | --- | --- | --- | | **Sheldon’s Questionnaire (Please ask to patient or any witness)** | **Yes** | **Score** | | At times do you wake with a cut tongue after your spells? |  | **2** | | At times do you have a sense of *deja vu* or *jamais vu* before your spells? |  | **1** | | At times is emotional stress associated with losing consciousness? |  | **1** | | Has anyone ever noted your head turning during a spell? |  | **1** | | Has anyone ever noted that you are unresponsive, have unusual posturing or have jerking limbs during your spells or have no memory of your spells afterwards (score as yes for any positive response)? |  | **1** | | Has anyone ever noted that you are confused after a spell? |  | **1** | | Have you ever had lightheaded spells? |  | **-2** | | At times do you sweat before your spells? |  | **-2** | | Is prolonged sitting or standing associated with your spells? |  | **-2** | | **TOTAL** |  |  | | ≥1 likely seizure (~94% sensitivity & specificity); <1 likely syncope, consider cardiac referral | | | | | |
| **Advice to be given (examples): pending further advice from clinic**   * A single appointment will be issued in the first instanceIf the patient does not attend, it won’t be automatically rebooked but can be on request * Information sheet for suspected first seizure/new epilepsy given to patient? * Please fax/send copy of relevant CasCard or GP notes with form (including ECG) | | |

Blank Page

Patient information sheet on next page

## Patient Information Sheet for suspected first seizure/new epilepsy

## You have been given this information sheet because your doctor suspects that you may have had a seizure, or developed epilepsy. The diagnosis of a seizure or epilepsy is not always straight forward, so you will be referred to a specialist epilepsy clinic for a further assessment and advice and will be offered the next available new patient appointment. You will be given more information and a detailed explanation when you come to the clinic. You might be at risk of further attacks. Even if you have already been started on treatment, there are some safety precautions listed below that you are advised to take.

**Safety**

Avoid circumstances where a seizure could have serious consequences, not only for you but for other people for example:

* Riding a bicycle, especially in traffic/without a helmet
* Working on ladders, roofs or scaffolding
* Being by an unguarded open fire/flame
* Swimming alone (inform the pool attendant and/or have a friend with you)
* Taking a bath - a shower is preferable, or bath in shallow water, with the door unlocked and someone else in the house who can keep a check on you
* Standing too close to the edge of tube/train platforms or road pavements
* Operating potentially dangerous machinery e.g. chain saw, manufacturing equipment

**Driving** is a special case. You **must not drive** at all at least until you have been seen in the clinic. Unless another treatable cause of your attack(s) is found, you are **required by law** to inform the DVLA. You will not be allowed to drive for at least 6 months, and more commonly 1 year from your most recent seizure. This is for your own safety, and that of other road users and pedestrians. Failure to inform the DVLA is a criminal offence, and you can be fined up to £1000. DVLA Telephone : 0300 790 6806 [www.direct.gov.uk/en/Motoring/DriverLicensing/MedicalRulesForDrivers](http://www.direct.gov.uk/en/Motoring/DriverLicensing/MedicalRulesForDrivers)

**First Aid During A Seizure**

Most seizures will stop on their own after a few minutes, and no emergency action is needed. It is often a good idea to make sure your friends/family/colleagues know what to do in case you have another attack. This will not only help ensure that they are able to look after you but also reduce their stress or anxiety:

**They should:**

* Summon help if they are alone with you
* Cushion your head
* Remove sharp, hot or hard objects from your surroundings
* Only move you if you are in a dangerous place (e.g. at top of stairs or in the road)

**They should not:**

* Put anything in your mouth (there is **no** danger of swallowing the tongue)
* Restrain the convulsive movements or hold you down
* Leave you until you have recovered

After a seizure they should roll the you onto your side, into the recovery position and if your breathing is still laboured, check nothing is blocking your throat (e.g. dentures, food, chewing gum)

When you have recovered, if you don’t already have a treatment plan, you should inform your GP that another attack has occurred and seek advice on what to do next.

**They should call an ambulance for any of the following:**

* Your seizure lasts longer than usual, or more than 5 minutes if this is not known
* One seizure follows another without recovery in between
* You have injured yourself or have difficulty breathing after a seizure

**Further information on First Aid can be obtained from the Epilepsy Society’s website at**: <https://www.epilepsysociety.org.uk/first-aid-epileptic-seizures#.Xar3BXdFybj>

**General information:**

**What is a seizure?**

A seizure (sometimes called a fit, an attack, a convulsion or a turn) is a sudden, brief disruption of normal brain activity. The seizure may have different forms depending on whether this happens in all the brain at once or if the seizure is in a part of the brain.

**What is epilepsy?**

If someone has repeated unprovoked seizures this is epilepsy and medication is usually prescribed. Most patients who are treated for epilepsy will get better although they may need to take tablets (antiepileptic drugs) to ensure this.

**Antiepileptic Drugs:**

If a diagnosis of epilepsy is made, and you are treated with antiepileptic drugs, you should take them regularly and not run out (make sure you request a follow up prescription from your GP in good time). You are entitled to free prescriptions. You will need a Prescription Charge Exemption Certificate (FP92) which you can get from your Health Authority. To obtain the certificate you should complete form FP92A - available from your doctor, hospital or pharmacist. The FP92 can also enable you to get a disabled persons railcard (there is a charge for this).

Oral contraception (and other tablets) may need to be taken at different doses if antiepileptic drugs are taken. Check with your GP or hospital doctor if in doubt. If you are taking tablets you should keep an up-to-date and complete list in your wallet, and bring them to any clinic appointment.

**Further information**

Once you have been seen in the epilepsy clinic, they will be able to provide you with any further information and address any questions you may have. If you have questions or need further advice before then you should either ask your GP, or the team who gave you this leaflet.

**Further information is available at:**

|  |  |  |
| --- | --- | --- |
| **Organisation** | **Web address** | **Telephone number** |
| NHS Choices | [www.nhs.uk/Conditions/Epilepsy](http://www.nhs.uk/Conditions/Epilepsy) |  |
| Epilepsy Action | [www.epilepsy.org.uk](http://www.epilepsy.org.uk) | 0808 800 5050 (free) |
| Epilepsy Society, | [www.epilepsysociety.org.uk](http://www.epilepsysociety.org.uk) | 0149 460 1400 |
| St George’s First Fit (Neurology) Bookings | [stgh-tr.Neuro@nhs.net](mailto:stgh-tr.Neuro@nhs.net) | 0208 725 4321 |