

REFERRAL GUIDANCE

FOR TREMOR DISORDERS AND SUSPICION OF PARKINSONISM

Greater Glasgow & Clyde Movement Disorder Clinics

A network of Movement Disorder Clinics (MDC's) is established in Greater Glasgow & Clyde, run by a physician or neurologist with Parkinson's disease nurse support staff.

Who to refer:

Patients with the following conditions :

- Suspicion of Parkinson's Disease or Parkinsonism.
- Tremor of uncertain cause or where there are management difficulties.
- Elderly patients with Movement Disorder should be referred to the local Movement Disorder Clinic.
- Patients with dystonia (e.g. torticollis) should be referred to the Department of Neurology, Southern General Hospital. Patients with other movement disorders should be referred to the local Movement Disorder Clinic.

We suggest the following:

- **Early** referral of new patients through SCI Gateway on suspicion of the diagnosis.
- Do not routinely start treatment before referral (this helps assessment and improves diagnostic accuracy).
- There is rarely any urgency to prescribe at **initial** presentation. It is usually better to delay until the diagnosis and care plan have been agreed with the specialist.

How to Refer:

- Via SCI Gateway.

On suspicion of diagnosis:

- Tell the patient of your suspicion of 'parkinsonism' or uncertain tremor disorder and the need for confirmation by referral.
- Check repeat prescriptions for Stemetil and other drugs that can cause Parkinsonism.

What to expect from the clinics :

- Standardised treatment plans will be applied across clinics. These will follow best practice according to SIGN guideline 113 January 2010.
- Referral to allied health professionals will be as clinically indicated.
- Clinic attendance will be required for most patients. Some patients e.g. in nursing homes, will have liaison conducted by the Parkinson's nurse instead.

(Grossset DG MacphheeGJA Nairn M **Diagnosis and pharmacological management of Parkinson's disease: summary of SIGN guidelines** BMJ 2010; 340:b5614)