University of California, Davis Health System
Telemedicine Program Referral Guideline

Pediatric
Neurology
Telemedicine Consultations

The following is a listing of clinical conditions appropriate for telemedicine pediatric neurology consultation. If you would like to refer a patient with a condition that is not listed below, please send your request along with the patient's chart notes to the telemedicine coordinator for the specialist's consideration.

Clinical Conditions:
Seizures
Development/neurological deterioration
Weakness/hypotonia
Neuromuscular disorders
Movement disorders

Clinical Information If Available:
Complete H & P

Pertinent outside records, documentation of previous neurological/developments evaluation

Current medications, allergies & drug levels

Summary of patient's course regarding neurological issues: frequency, severity and response to interventions

Copy of PCP initial intake and follow-up evaluation pertaining to problem prompting referral indicating his/her impression, plan & specific questions

Relevant family/social history

Report of labs, diagnostics (EEG), CT and MRI films
Some assurance that the family understands reasons for referral Neurological questionnaire

Consultant: Shubhangi Chitnis, M.D**.

Appointment Scheduling:
New: 60 min
F/U: 30 min

Level of Presenter Required:
Primary Care Provider for first 15 minutes, PA, FNP, RN

Video Equipment Required:
1. Videoconferencing unit

The following information must be received prior to scheduling an appointment:
1. Telemedicine Consult Request form
2. Recent H&P and all applicable clinical information from patient chart
3. Additional labs, patient data or a patient history form prior to appointment

The following must be received before consult begins:

1. Signed consent form explained to the patient's satisfaction
2. Signed HIPAA acknowledgment (new patient)

UCDHS Telemedicine Clinic
Toll Free: 1- (877) 430-5332
Referral Fax: (866) 622-5944
http://www.ucdmc.ucdavis.edu/cht/services/telemedicine/specialties.html

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