



PNI – Lower Limb Referral

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<p><b>RE:</b> Patient Name:</p> <p>DOB:</p> <p>NHS number:</p>	<p>Address:</p>
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<p><b>Details of Injury – Date of Injury :</b></p> <p>Reason for referral:</p> <p>Diagnosis:</p> <p>Mechanism of Injury:</p> <p>Hand Dominance:</p> <p>Occupation:</p> <p><b>Referring Hospital:–</b></p> <p>Ward:</p> <p>Ward telephone number:                      Ward fax number:</p> <p>Consultant:,</p> <p>Surgical team telephone number:</p> <p>Surgical team contact email:</p> <p>Spoken language (?Translator):</p>	<p><u>Information only</u></p> <p>Significant spinal injuries are found in at least 20% of Brachial Plexus Injuries. We advise that all patients have AP + Lateral, C Spine, Thoracic Spine, and of lumbar spine and that MRI (or CT) is done when indicated. MR scan of cervical spine is particularly useful.</p> <p>Where there has been concern of vascular involvement a MR (or CT) Angiogram should be done on the affected side.</p>
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Neurological exam

Horner’s Sign:

Neuropathic pain:

Pain:  Score:

Distribution:

Muscle	MRC Grade

