EASTSIDE MEDICAL CLINIC

RAPID ACCESS TIA FORM

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referrals@eastsidemedicalclinic.com

PATIENT INFORMATION

Last Name | DOB | Address
First Name | Age | Sex ☐ M ☐ F
HC Number | Phone
Vrs.Code | E-mail

Referral Date

Reason for referral

☐ TIA
☐ Stroke
☐ Stroke Prevention Assessment

Referred by ☐ ER Physician ☐ Family Physician ☐ Specialist
Referring Physician Name
Billing # | Phone | Fax
Family Physician
Results copied to

PRESENTING SYMPTOMS / CLINICAL FEATURES

Date of onset | Symptoms Resolved? ☐ Y ☐ N
Duration of symptoms to complete resolution:

Hemiparesis / Arm Weakness	☐	☐ Left	☐ Right
Hemiparesis / Leg Weakness	☐	☐ Left	☐ Right
Sensory Disturbance	☐	☐ Left	☐ Right
Speech Disturbance	☐		
Visual Disturbance	☐	B.P. /	
Vertigo / Balance Problems	☐		

PAST MEDICAL HISTORY / VASCULAR RISK FACTORS

☐	Hypertension	☐	Hyperlipidemia
☐	CAD / IHD	☐	Smoker
☐	Heart Failure	☐	Obesity
☐	Hx of Stroke / TIA	☐	Diabetes
☐	Atrial Fibrillation	☐	Migraine
☐	PAD	☐	Other

True Aspirin Intolerance ☐ Yes ☐ No

ABCD² Score

A = Age	More than 60 years old	1	
B = BP	Systolic > 140 mmHg and/or Diastolic > 90 mmHg	1	
C = Clinical Features	Unilateral Weakness	2	
	Speech disturbance w/o weakness	1	
	Other	0	
D = Duration of Symptoms	More than 60 minutes	2	
	Between 10 – 59 minutes	1	
	Less than 10 minutes	0	
D = Diabetes	Patient has Diabetes	1	

Total ABCD² Score

TREATMENT HISTORY / OTHER RELEVANT INFORMATION

CURRENT MEDICATIONS

PATIENT ADVICE

Please confirm with patient that:

- He or she should not drive until medically cleared at the hospital or TIA/Stroke clinic ☐
- They should be accompanied to the hospital or clinic, preferably by a witness to event ☐
- **If they experience any further events, immediately proceed to nearest Emergency Department and/or Call 911** ☐

Referrals from ED Physician – Please ensure that results are attached for the following key investigations: CT Brain, Carotid Dopplers (exclude if presenting with vertebrobasilar syndrome), ECG, Hb, Electrolytes, Fasting Glucose, Lipid Profile, TSH, Folate, ESR

Referrals from GP/Specialist Office – Consider admission if ABCD² score is equal to or greater than 4, or more than one TIA episode in a week, or on warfarin or in AF, or age less than 50 years, or co-morbidity requiring hospitalization, or **presence of neck pain or headache**.