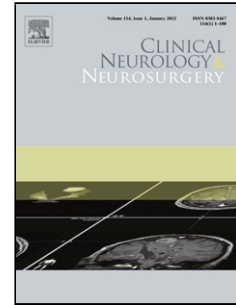


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Referral management: Which patients are deemed not appropriate for neurologic consultation, and what happens to them?

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HIGHLIGHTS

- Triaging neurology referrals appears reasonably safe and, to a moderate extent, succeeded in freeing consultants' time for medically more appropriate consultations
- The recommendation not to schedule a patient for consultation resulted in dissatisfaction of some referring providers (and presumably, patients) and this dissatisfaction is reflected in attempts to circumvent the triage system in a substantial minority of cases
- In referrals not scheduled for consultation, pain, headache and dizziness were the most common chief complaints; about a quarter were deemed 2nd opinion consultations, and there was a female preponderance
- Attempts to optimize referral patterns need to consider not only medical necessity and safety, but also the roles, perceptions and attitudes of both referring providers and patients

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