



Spells (Transient episodes of altered consciousness)

Developed by	American Academy of Neurology
How developed	In 2014, a survey identified the most common reasons for referral. In 2018, the content was reviewed and updated by experts. The templates were developed after review of the literature. In addition to a dedicated work group, multiple committees were asked to review and comment.
Additional essential patient information	<p>A brief summary of the case details pertinent to the referral, including family history. Please indicate in the summary if the patient has any of the following:</p> <ul style="list-style-type: none"> • Prolonged altered consciousness • Abnormal movements with episodes • Identified triggers (e.g. position) • Inability to stand at all due to orthostasis • Chest pain or palpitations • Any reported focal signs during the episode <p>Provide:</p> <ul style="list-style-type: none"> • Check orthostatic vital signs if fainted with standing
Additional patient information, if available	Imaging and EEG (often of little value).
Alarm symptoms/conditions	Prolonged altered consciousness
Tests/procedures to avoid prior to neurologic evaluation; if they have been performed, please forward results	<ul style="list-style-type: none"> • Imaging • EEG
Common rule-outs to consider prior to consults	Consider cardiac causes: Check EKG and review history. If cardiac mechanism suggested, consider Holter Monitor or refer to cardiology.
Relevant "Choosing Wisely" elements	Do not check Ultrasound of carotids for syncope
Healthcare professional and/or patient resources	<p>Healthcare Professional Information: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3613203/</p> <p>Patient Information: https://www.uofmhealth.org/health-library/confu</p>

HVC Pertinent Data Sets <https://www.acponline.org/clinical-information/high-value-care/resources-for-clinicians/high-value-care-coordination-hvcc-toolkit/pertinent-data-sets>