# Numbness/Weakness/Gait instability

**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**  
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:
- Rapidly evolving weakness or gait disorder
- Back or neck pain
- Headaches
- Current functional level
- Cognitive changes
- Tremor

Prior to the consult:
- Order Physical therapy for patients at risk of falls for cane, walker assessment.
- If concerned about a neuropathy provide:
  - Fasting glucose
  - Vitamin B 12
  - SPEP with immunofixation
- If weak or muscle pain:
  - Hold statin
  - Check CK levels
  - Lab tests:
    - Sedimentation rate or CRP
    - TSH

**Additional patient information, if available**  
- EMG (Value increased when directed to the appropriate anatomy or component of the peripheral nervous system)
- MRI or CT

**Alarm symptoms/conditions**  
Rapidly evolving gait disorder or weakness.

**Tests/procedures to avoid prior to neurologic evaluation; if they have been performed, please forward results**  
- EMG
- Imaging

**Common rule-outs to consider prior to consults**  
None provided

**Relevant “Choosing Wisely” elements**  
None provided

**Healthcare professional and/or patient resources**  
Healthcare Professional Information:

Patient Information:
- [https://www.ninds.nih.gov/Disorders/All-Disorders/Headache-Information-Page](https://www.ninds.nih.gov/Disorders/All-Disorders/Headache-Information-Page)