**Transient Focal Neurologic Deficit**

<table>
<thead>
<tr>
<th>Developed by</th>
<th>American Academy of Neurology</th>
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<tbody>
<tr>
<td>How developed</td>
<td>A survey identified the most common reasons for referral. The templates were developed after review of the literature. In addition to a dedicated work group, multiple committees where asked to review and comment.</td>
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| Additional essential patient information | A brief summary of the case details pertinent to the referral, including vascular risk factors and family history. Please indicate in the summary if the patient has any of the following:  
  - Atrial Fibrillation  
  - Cardiovascular or peripheral vascular disease  
  - History of similar events  
  - Headache  
  - Incomplete recovery  
  Provide the following:  
  - Blood Pressure  
  - Fasting lipid and glucose levels  
  - Start anti-platelet agent unless contraindicated.  
  Prior to consult  
  - Treat as appropriate |
| Additional patient information, if available | None Provided |
| Alarm symptoms/conditions | If the transient deficit is not easily accounted for by non-vascular mechanisms, the patient should be sent to the ER for rapid assessment for a treatable vascular mechanism and prevention of stroke. |
| Tests/procedures to avoid prior to consult | MRI or CT scans  
Cardiac Imaging  
Carotid imaging  
EEG |
| Common rule-outs to consider prior to consults | Seizures, migraine, hypoglycemia, functional disorder, structural CNS disorder including subdural |
| Relevant "Choosing Wisely" elements | None provided |
| Healthcare professional and/or patient resources | Healthcare Professional Information:  
Patient Information:  