

## **Neurological Issues**

## **Disposition**

Presentations related to a primary CNS disorders are generally admitted to Neurology. Specific entities identified as appropriate for the Neurology service include:

- ALS (requiring neurological care)
- Dementia (when rapidly progressive and requiring specialized workup)
- Headache, status migrainosis, and idiopathic intracranial hypertension
- Multiple sclerosis (acute flare)
- Myasthenia gravis crisis
- Myelopathies (non surgical)
- Parkinson's disease and related movement disorders (if the primary problem is medication adjustment)
- Vertigo (central), ataxia, and diplopia.
- Visual loss (consider ophthamology if appropriate)

## **Caveats**

- Spinal cord compression/surgical myelopathy are admitted to Neurosurgery
- Non-surgical brain tumors are admitted to GIM or family medicine
- New onset delirium, hypertension causing neurological symptoms, and CNS infections are admitted to GIM

Last updated: July 2018