When to Use the NHS e-Referral Service - TIA Risk Assessment

The NICE Guidelines published in 2008 (reviewed May 2014) on Stroke & TIA services recommended that the risk of stroke be assessed, in patients who have had a TIA, using the ‘ABCD2’ validated scoring system:
https://www.nice.org.uk/guidance/cg68

A high risk patient is one with an ABCD2 score of 4 or above, or who has had two or more TIAs within one week. According to the NICE Guidelines, these patients must be seen within 24 hours.

A lower risk patient is one with an ABCD2 score of 3 or below, or who presents more than one week after the symptoms have resolved.

It is important that referrers know that the NHS e-Referral Service TIA Clinics are for lower risk patients only and that they must carry out an ABCD2 score before referral. The use of referrer alerts within the NHS e-Referral Service can be used to reinforce this message (see referrer alerts below).

All referrals received by the hospital should be assessed at least daily to ensure that no patient with an ABCD2 score of 4 and above, (or without a score) has been referred in error. Any high risk patients would need to be contacted so that they could be assessed the same day.

Configuring NHS e-Referral Service to support TIA appointments

Slot Protection
To set up the TIA Clinic to offer next day appointments, and appointments for up to 7 days:

- The slot protection and freeze time should be set to zero.
- Next day appointments must be available on the hospital Patient Administration System (PAS).
- Slot Polling should be set for seven days, to ensure that only appointments within that period are offered.

Clinic Priority
The clinic priority should be set to Urgent, not Two Week Wait (2WW), as this is associated with cancer referrals.

Referrer Alerts
The Directory of Services (DoS) should include a ‘Referrer Alert’ stating that “If patients have an ABCD2 score greater than 4 please refer them for same day assessment”
Use of local referral proforma
Local proformas should be used if these exist. The link to the proforma should be included in the service details. Also, consider including instructions on what to do if the ABCD² score is 4 or above, or if the patient has had two or more TIAs in the previous week, within the Service Details.

Mapping Services to Clinic Types and SNOMED Terms
TIA Clinics should be mapped to the Speciality of ‘Neurology’ and to the Clinic Type of ‘Transient Ischaemic Attack’. Service definers may wish to add the SNOMED Term “TIA” to the clinical terms associated with the service. However, it should be noted that many non-TIA services have this term added already.

Key points for referrers
- TIA Clinics, in which the patient is seen within seven days, are only for patients with an ABCD² score of 3 or less or who have had their TIA more than seven days before. Patients with an ABCD² score of 4 or above, or who have had more than one TIA in a week should not be referred via the NHS e-Referral Service to TIA Clinics.
- Local availability of TIA clinics should be made known to referrers by local providers.
- Clinics will be listed as Urgent, so select ‘Urgent’ as the priority in the search criteria.
- Referrers may use the Speciality & Clinic Type of Neurology/Transient Ischaemic Attack to search for services. The SNOMED term “TIA” or “Transient Cerebral Ischemia” may also be used to search for services, but referrers should check that any services which are returned are appropriate for their patient.
- Use any local proforma suggested by the provider – usually available via a hyperlink from the service information. These proformas will usually contain the ABCD² Scoring system.
- As with any urgent referral, the patient should leave the surgery with an appointment date and time. If it is not possible to book an appointment, then either alternative methods should be used to refer the same day or referrers must ensure that they have the means to contact the patient with an appointment later the same day.
- Appointment Slot Issues should not occur with these clinics. However in the rare circumstances where this does occur the Defer to Provider facility must be used. This relies on the hospital having a robust system to identify ASIs for their TIA clinics. It is always worth checking in such cases that the patient has received an appointment within the seven days.