

**Primary Care Referrals of Cauda Equina should be discussed between GP & Neurosurgery**

**Mon-Fri 08:30-15:30 all Primary Care Referrals should be seen in OPD 7 By Neurosurgery.**

**If patient arrives outwith these times they will be redirected to ED to be seen by ED team.**

**If a arrives at ED within these times, contact Neurosurgery Registrar with view to transfer to OPD7.**

( This only applies to patients referred from Primary Care discussed with Neurosurgery. Self-presenters should be seen by ED. )

**Assessment in ED**

**Full Neurological Assessment in ED**  
Consider Pre & Post Void Bladder Scan

**Is Cauda Equina Suspected?**

**NO**

**YES**

**Manage Alternative Diagnosis**

**Acute Mechanical Back Pain**

If a patient requires admission for Acute Mechanical Back Pain, they should be admitted under Neurosurgery

**Ambulatory Emergency MRI**

If following discussion with Neurosurgery, the patient is deemed suitable for urgent outpatient MRI:

Request Scan on TRAK with Patient Contact Details  
MRI will contact Patient with Time for Scan

After MRI patient will go to:  
DCN OPD 7 (Mon-Fri 08:30-15:30)  
Emergency Department (Sat & Sun)

**MRI Referral Process - See Imaging Guideline**

**Patient should not routinely be discussed with Neurosurgery prior to MRI**

**Request MRI Lumbar Spine on TRAK**

**Mon-Fri 09:00-17:00**

Call DCN MRI on 50869 / 50870.

You should not need to discuss with a Radiologist

**Mon-Fri 17:00-09:00 & All Day Sat/Sun**

If OOH Scan required - Call On-Call RIE Radiology Registrar - 23796

**Referral to Neurosurgery**

**Patient can be admitted to ED Observation while awaiting MRI Scan or Results**

**Refer to Neurosurgery via Switchboard if Positive Scan Result**

**Neurosurgical Registrar to Document Plan on TRAK following Review**

Admit to DCN if admission required