Referral and visitation requirements of newly injured patients admitted to the Spinal Cord Injury Centre of Western Denmark

Requirements:

- All investigations must be completed
- The patient is scored according to ASIA classification (ISNCSCI) http://www.asia-spinalinjury.org/elearning/ISNCSCI_Exam_Sheet_r4.pdf
- Every field has to be completed, also when in doubt please use Glasgow Coma Scale to assess the level of consciousness

Name	
Address	
Danish Personal Identification Number (10 digits)	
Date of examination	
ASIA (ISNCSCI) - classification	
Assessment number	
Assessment performed by (name, job title)	
PATIENTLABEL:	1/5 Referral and visitation requirements VCR, June 2014

	Α	В	С	D	Sumscore
Disability	Severe	Moderat	Mild	None	
Physical					
F1 Bloodpressureand cardiovascular function	Severe disturbances of blood pressure Need of pressor Need of continuous circulatory monitoring Score: 6	Supine hypotension Score: 1	Orthostatic hypotension when upper body elevation above 45 degrees Score: 0	Score: 0	
F2 Bladder function	Pt. has no bladder function at least 1 day after discontinuation of indwelling catheter (No need to urinate, initiating urination and failure to insufficient emptying as assessed by residual urine measurements). Score: 0	Minimum 1 day after discontinuation of indwelling catheter. Have urinary urgency, can initiate urination. Residual urine 100 -200 ml (measured at least 5 times).	Minimum 1 day after discontinuation of indwelling catheter. Have urinary urgency, can initiate urination. Residual urine 50 ml (measured at least 5 times). Score: 0	Pt. have normal bladder function (Have urinary urgency, can initiate micturition and empty to insufficient as assessed by residual urine measurements). Score: 0	
F3 Bowel function	Pt has no bowel function (No bowel filling sensation Cannot initiate bowel emptying and / or incontinent of stool) Score: 0		Pt. has received postoperative bowel function Pt has modest use of laxatives. (Can brand bowel filling, even empty the bowel and are not incontinent of stool). Score: 0	Pt have normal bowel function (Can feel bowel filling, even empty the bowel without the use of laxatives and are not incontinent of stool). Score: 0	
F4 Infections	Unexplained episodes of fever: temperature > 38.5 degrees Celsius. Focus of infection in CNS and temperature > 37.5 No treatment plan with antibiotics available. Score: 6	Fever periods with temperature <38.5 degrees Celsius with identified focus, implemented appropriate antibiotic treatment resulting in declining infection counts and plan available Score:4	Pt afebrile to put antibiotic treatment and decreasing infection counts. Score:1	Pt afebrile with normal infection counts. Score: 0	
F5 Severe multitrauma	Lesions in multiple organ systems that require continuous intensive monitoring and intervention There is no plan for treatment and mobilization. Score: 6	Lesions in multiple organ systems that require immobilization but not continuous monitoring A plan for treatment and mobilization. Score: 5	Successfully treated lesions in multiple organ systems. Score: 0	Score: 0	

PATIENTLABEL:	
	Refe

F6 Autonom dysreflexia Periodes/episodes of Hypertension Tachycardia / Bradycardia Hyperpyrexia Visible sweating Flushing above level of lesion	Severe controllable autonomic dysreflexia in need of continuous monitoring Periodic alternating presence of the symptoms of F6: Undecided need medical or technical pacing.	Controllable autonomic dysreflexia in need of monitoring by attack symptoms. Need for pacing clarified initiated and completed and follow-up planned.	Controllable autonomic dysreflexia in need of monitoring by attack symptoms. No need for pacing.	
 Intense, throbbing headache 	Score: 6	Score:0	Score: 0	Score: 0
F7 Nutrition/ weightloss	Weightloss ≥ 20% Score: 4	Weightloss ≥ 10% but < 20% Score: 2	Weightloss between 5 and 10 % Score: 1	Score: 0
F8 Dysphagia	Unresolved dysphagia Score: 6	Resolved dysphagia issues Pt has been brought PEG tube or temporary nasogastric tube. Score: 3	There is a plan to examine the dysphagia. Score: 2	Eat and drink normally. Score: 0
F9 Respiratory	- Tracheotomy with cuff	Tracheotomy without cuff	Can clear the respiratory	Tracheotomy with cuff and
function All patients with cuffed needle must be in receipt	without established watch keeping. Respiratory phasing (short as well as long-term) and / or	with moderate suction needs.	tract with coughing support.	established watch. or Pt. can defend his airways.
of the VCR having	Pt with unresolved oxygen			
established watch keeping	needs Score: 6	Score: 3	Score :1	Score: 0
F10 Homeostasis	I.e.: -Untreated severe hypercalcaemia (ionized Ca + + above 1.6 mmol / I) -Total parenteral nutrition. Difficult to achieve fluid balance. Do adjusted daily -Poorly controlled diabetes -Severe electrolyte derangement Score:6	I.e.: Treated hypercalcaemia (ionized Ca + + above 1.6 mmol / I) Score:3	No need for intervention in relation to homeostasis. Score: 0	Maintains even normal homeostasis. Score: 0

PATIENTLABEL:		

	Α	В	С	D	Sumscore
Disability	Severe	Moderat	Mild	None	
Mental					
M1 Level of consciousness NOTE The motor response adapted neurological level of spinal cord injury	Glasgow Coma Score 3-9 The patient is not a candidate for	Glasgow Coma Score 10-13 The patient must be alert, oriented in time, place and	Glasgow Coma Score =14	Glasgow Coma Score = 15 No impact on consciousness	
	rehabilitation at VCR.	own data Score: 5	Score: 0	Score: 0	
M2 Coginition	Severe cognitive deficits. Severe concentration, attention and memory disturbance. No recognition of the time and place themselves and others. Do not respond to external stimuli. Confusion. Passive or pulsed.	Moderate cognitive deficits. Moderate concentration, attention and memory disorders. Uncertain recognition of time, place, self and others. Passive or pulsed Acting out / agitated behaviour	Light concentration and awareness and memory. Secure recognition of the time and place themselves and others The patient should be discussed with VCR.	Normal cognitive function	
	Acting out / agitated behaviour. Confabulation. The patient is not a candidate for rehabilitation at VCR.	The patient is not a candidate for rehabilitation at VCR. The patient should be discussed with VCR.			
	Score: 6	Score: 6	Score: 3	Score: 0	

PATIENTLABEL:	4/5
	Referral and visitation requirements VCR, June 2014

	Α	В	С	D	Sumscore
Disability	Severe	Moderat	Mild	None	
Activity and participation					
A1 Communication and self-care	Pt is not able nor with necessary equipment, to express needs or wants and does not exhibit signs of problem solving and communication. The patient is not a	Pt is partially able to express needs or wants any. the use of relevant tools. Demonstrates some ability to problem solving and communication. The patient should be	Pt. can with light support able to express needs or desires. Displays the ability to problem-solving and communication.	Pt is fully able to express needs or desires.	
	candidate for rehabilitation at VCR. Score: 6	discussed with VCR. Score: 4	Score: 0	Score: 0	

	А	В	С	D	Sumscore
Disability	Severe	Moderat	Mild	None	
Total sum-score				>	
(count)					

Reflexes	
Patellar	
Achilles	
Plantar response	
Other scores and tests	
Other information (age, co-morbidity,	
general condition, previous function)	

PATIENTLABEL:			