

## Referring to a specialist

Written by Administrator

Saturday, 05 February 2011 04:31 - Last Updated Monday, 06 February 2012 21:24

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**Referral to a specialist is indicated when a child fails to meet the motor milestones as described in the “Signs of Weakness by Age” surveillance aid.**

### **Indications of the need for urgent referral to a neurologist:**

- Tongue fasciculations
- Loss of motor milestones
- CK greater than 3x normal
- Anticipated surgery, due to anesthesia concerns in children with neuromuscular disorders

If a patient has an indication for urgent referral, you should consider direct contact with the neurologist’s office to share concerns, as this may expedite the appointment.

Note: Urine the color of cola/tea, especially with muscle pain: send child immediately to the ER for urgent emergency intervention

### **When referral to neurology is not urgent, additional referrals to consider:**

- **Therapy services (PT ,OT, speech therapy) and early intervention**
- Therapists will perform a more detailed motor evaluation.
- Therapists do not make diagnoses.
- Therapists may detect a need for additional referrals.
- Therapists monitor progress over time.
- In benign forms of motor delay, physical and occupational therapy may promote acquisition of skills.
- Therapists may help parents feel more comfortable working with their children and achieve a greater sense of control.
  
- Referral to **developmental pediatrician or pediatric rehab specialty** may be an appropriate first referral for patients who do not have an indication for urgent referral.

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- The referring practitioner should **continue to evaluate the child's motor development over time**, in partnership with the therapists and other specialists. Evaluate whether the child improves, stay the same, or regresses. Referral to a neurologist is warranted for children without improvement after 6 months.

- Appreciate that a **diagnosis will inform the care given by therapists and other specialists**.