The following is a listing of clinical conditions appropriate for clinical telehealth adult neurology consultations. If you would like to refer a patient with a condition which is not listed below, please send your request with the patient’s chart notes to the telehealth coordinator for the specialist’s consideration.

**Clinical Conditions:**
Seizures
Epilepsy
Headache, Migraines, and others
**Please note: no behavior issues or autism referrals**

**Clinical Information If Available:**
Complete H & P
Any previous neurologic consultation and follow up
Ongoing medications including detailed regimen
Allergies
Detailed description of previously tried medications, procedures and or surgeries and or surgeries for the ongoing problem
Detailed reports of EEGs including CDs with raw recording
Detailed reports of brain imaging including CDs with raw recording, and this includes MRI, MRA, MRV, CT, CTA, PET scan, etc.
Any consultation that pertains to the present problem such as Neurosurgery, Ophthalmology, Genetics, Neuropsychologic Testing, Oncology, etc.
Any additional information that is deemed useful

**Other:**
Clear understanding of the purpose as well as the limits of teleneurology

**Consultant:** Jeffrey D Kennedy, MD, Epileptology
Marc Lenaerts, MD, Headache Medicine
Palak Parikh, MD, Epileptology

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**Appointment Scheduling:**
New: 60 minutes
F/U: 30 minutes

**Level of Presenter Required:**
Primary Care Provider for entire visit: MD, PA, NP

**Video Equipment Required:**
Videoconferencing unit

**The following information must be received prior to scheduling an appointment:**
1. Telehealth Referral Request Form.
2. Recent H&P and all applicable clinical information from patient chart
3. Additional labs, patient data or a patient history form prior to appointment

**The following must be received before the consult begins:**
1. Signed UC Davis Health Acknowledgement of Receipt: Notice of Privacy Practices form (new patients only)
2. Documented verbal consent from patient for participation in telehealth consultation