SERVICE-AT-A-GLANCE

(MNH) Neurosurgery

Location – Are you located on one floor or in several locations in the hospital?
- 4NorthEast
- 3 East

Population – Describe in point form the characteristics of the patient population.
- Brain tumours (benign/malignant)
- Spinal stenosis/herniated discs (ACDF, posterior laminectomy/fusion)
- Hydrocephalus (VP shunt)
- Parkinson’s (DBS insertion)
- Chiari’s Malformation
- MVD
- AVM
- Epileptic focus resection
- SDH

Age range
- 18 -90+ years old although mostly between 50 and 75 (younger population in epilepsy)

Impact of illness/injury
- Cognitive problems
- Dizziness, h/a, nausea/vomiting
- Seizures
- Post-op recovery period

Medications: be aware of their indications as well as side effects affecting functions and precautions
- Corticosteroids (Decadron)
- Dilaudid
- PCA pump
- Anti-seizure medication (Keppra, Dilantin)
- Antibiotics (Vancomycin, Cipro)
- Chemotherapy (Temodal, Avastin)
- Radiotherapy
- STUPP protocol (radiotherapy + chemotherapy)

Role – Describe the role of your service in point form.
- Swallowing Ax
- Functional Ax + assistance with d/c planning
- Cognitive appreciation and driving screen
- Positioning
- Discussion with MD team of potential medical treatment plan depending on level of function
- Treatment plan (acute/chronic/end stage)
- Continuity of care (rehab/convalescence/homecare/community/LTC/palliative)
Team and Key Contacts – Indicate if you work in a multidisciplinary team; who are the key players, staff doctors, consulting CNS’s and other specialists.

- Unit Coordinator: #1985 or #00933 or #0772
- Head Nurse: 4NE: # 00802 3E: #00655
- Assistant Head Nurse: 4NE spectra #23802 3E #09389
- Palliative/Pain Nurse: # #5512
- Brain tumour RN: ext: #5363 #2767
- NeuroSx residents: page through locating
- OT: pager: 514-406-1397 and 514-406-7993
- PT: pager: 514-406-2300
- SLP: ext: 8902 pager: 514-406-1757
- SW: brain tumour: #5357 pager:514-406-3516 other NeuroSx: #1205
- Dietician: ext: 8888-36512

Rounds – List the day(s), hours and location(s) of the clinical rounds for your service.

- Neurosurgery Rounds: Tuesday at 8am Chapel room 445
- Brain Tumor Rounds: Monday at 10:30am and Thursday at 8:15 am Chapel room 445

Medical Tests – Describe in point form the principle/most frequent risk factors that you assess specifically related to your patient population.

- CT scan
- MRI
- Doppler
- PET scan
- CT chest/abdo/pelvis

Assessments - Describe in point form the principle/most frequent forms that you complete specifically related to your patient population in addition to the psychosocial assessment.

- MoCA
- MMSE
- Star Cancellation/Line Bisection/Bell’s test
- Trail Making A & B
- SIMARD
- Kitchen Ax
- MVPT-R

Resources - Describe in point form the principle/most frequent hospital and community resources that you allocate specifically related to your patient population.

- Cancer lodge
- Rehab at Villa Medica as part of the “high grade glioma entente”
- Hebergement temporaire

“Insider” Info – List any tips, cautions, fast-tracks, templates or lists that would help facilitate a quick-start for someone new to this service.

- Need good knowledge of treatment options and protocols for d/c planning
- Driving guidelines for Sz
- Drain to be clamped by RN prior to mobilization when EVD
- Watch out for Foley catheter/IV lines
- Be aware of functional/medical prognosis for disposition (not rehab if only brain tumor biopsied; usually needs complete resection to be a candidate)
- Good knowledge/understanding of brain anatomy, tumor diagnosis
- 4 services:
  - Red: Parkinson's DBS, Epileptic focus resection, brain tumours
  - Silver: Spine Sx
  - Yellow: Malignant tumours
  - White: Benign tumours, VP shunt, hemorrhagic strokes, transnasal Sx, Chiari malformation