

Suspected Cauda Equina Syndrome (CES) Triage Chart - QEUH/RAH/IRH/GRI
Greater Glasgow & Clyde Physiotherapy Services

Suspected CES Signs & Symptoms

RECENT OR PROGRESSIVE

- Saddle anaesthesia/paraesthesia
(May be unilateral or bilateral)
- Bilateral or progression from unilateral to bilateral lower limb pain
- Bilateral or progression from unilateral to bilateral sensory/motor deficit in lower limbs
- Loss of sensation of bladder/ bowel filling
- Lack of awareness or loss of desire to void
- Difficulty with micturation
(Poor stream/having to strain/hesitancy)
- Urinary retention
- Bladder/Anorectal incontinence
- Sexual Dysfunction

Patient Assessed in Department



Patient Vetted via Telephone



1. Contact on-call Orthopaedic Doctor, via local hospital switchboard, to discuss case and request Orthopaedic assessment in A&E. *IRH patients must be discussed with and assessed by Orthopaedic on call doctor at RAH*
2. Write cover letter, addressed to Orthopaedic Doctor to accompany patient to A&E
3. Patient sent immediately to local A&E for further medical assessment. * IRH patients must travel to RAH*

1. Contact on-call Orthopaedic Doctor, via local hospital switchboard, to discuss case and request Orthopaedic assessment in A&E. * IRH patients must be discussed with and assessed by Orthopaedic on call doctor at RAH*
2. Phone local A&E Dept, inform spoken to Orthopaedics and sending a patient with suspected CES for further assessment, giving patients name and CHI number.
3. Patient sent immediately to local A&E for further medical assessment. *IRH patients must attend RAH*

Location	Switchboard	A&E Dept	Page No.
QEUH	201 1100	452 2811/2812	7470/7555
GRI	211 4000	211 4484	
RAH	887 9111	314 6195	

NB. Presenting features may vary. The whole clinical picture must be considered at all times.