|  |  |  |
| --- | --- | --- |
| 1. **a. Do you feel the benefits of the injections have worn off?** | **Yes** | **No** |
| b. If **yes**, how along ago? (Weeks) |  | |
| 1. **What is your usual interval between injections? (Weeks)** |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **a. Are you able / willing to attend an outpatient appointment if offered**   **(Bio - screening allowing)?** | | | | **Yes** | **No** |
| b. If **no** why? | Shielding or self isolating | CV |  | | |
|  | Other (Expand) | CV |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **How bad are your current symptoms?**   (Use of Livescore/ VAS separately if appropriate) | OK | Usual baseline  pre-injection level | Worse than normal |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. a. **Is your current (spasticity / dystonia /etc)causing any complications / safety concerns** – e.g. skin hygiene causing infected skin/ ulcers, can’t see etc. | | **Yes** | **No** |
| 1. If **yes**, what are these? |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. a. **Are you a carer or have you been identified as a key worker?** | | **Yes** | **No** |
| 1. Are your symptoms affecting your role? | | **Yes** | **No** |
| 1. If **yes**, how? |  | | |

|  |  |  |
| --- | --- | --- |
| 7. What would you like to do for your next injection appointment? | 1. Attend a face to face appointment as soon as we are able to provide one |  |
| 1. Wait until the normal service resumes, and tell us if you deteriorate in the meantime? |  |

**Triage Outcomes**

|  |  |  |
| --- | --- | --- |
| Injection appointment deferred by patient due to anxiety or Covid-19 risk | **Yes** | **No** |
| If Yes, person triaging should advise patient to contact us if their situation changes. | | |

|  |  |  |
| --- | --- | --- |
| **Please also Select the category that best represents the patient’s current presentation** | | |
| **1** | Very severe symptoms, high risk of needing to access other services - needs injecting urgently​ |  |
| **2** | Significant symptoms affecting work/lifestyle/mood, other treatments ineffective  - some risk of accessing other services - inject soon |  |
| **3** | Some symptoms but not severely affecting lifestyle  - delay until restrictions relaxed - if they deteriorate then to contact us. |  |
| **4** | Not worn off yet - estimate how long may continue to work for to then re-triage.   * If they deteriorate then to contact us. |  |
| **5** | No significant symptoms - patient to contact us if needed. |  |