**EPILEPSY CLINIC LETTER TEMPLATE**

**Diagnosis/problems:**

**Current medication**:

**Emergency seizure medication**:

**Previous medication history**: date/reason for stopped

**Anthropometry:**

* Weight: kg ( centile)
* Height: cm ( centile)
* HC: cm ( centile)

**Seizures:**

* Description of episodes:
* Seizure type: (Epileptic/non-epileptic)
* Syndrome:
* cause:
* Relevant Impairment:
* Other seizures:
* Prolonged seizures or status:

**Investigations**

* *EEG:*
* *MRI Brain:*
* *ECG:*
* *Bloods:*
* *Genetics:*

*Other investigations:*

*Pending investigations:*

**Birth details:**

* Pregnancy:
* Birth:

**Developmental history:**

* Motor:
* Fine and vision:
* Hearing and Speech:
* Social:
* Regression?

**School and education**:

**Behavioural difficulties**:

**Allergies / side effects** from anti-epileptic drugs:

**Immunisation:**

Other medical history:

**Family history**:

**Examination:**

* General
* Neurocutaneous marks or dysmorphic features.
* Right/left handed
* Cranial nerves.
* Neurological examination & focal neurological deficit.
* systemic examination.

**Summary and discussion:**

**Management plan:**

**Follow-up:**

Yours sincerely,

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CC: