

**NATIONAL COLLABORATING CENTRE FOR NURSING & SUPPORTIVE CARE
(NCC-NSC)**

NICE national clinical guideline – The management of transient loss of consciousness

Fourth guideline development group meeting

Thursday 30th October 2008

RCN HQ, Cavendish Square, London

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(NCC-NSC)**

NICE clinical guideline – The management of transient loss of consciousness

**Notes of the Fourth Guideline Development Group Meetings
Thursday 30th October 2008, commencing at 10.00 a.m., Room 218,
Royal College of Nursing HQ, Cavendish Square, London.**

PRESENT:

Paul Cooper (Chair,PC)	Neurologist, Hope Hospital, Salford
Robin Beal (RB)	Clinical Director, St Mary's Hospital – Emergency Department
Mary Braine (MB)	Lecturer, School of Nursing, University of Salford
Ian Bullock (IB)	Director, NCC-NSC
Sarah Davis (SD)	Senior Health Economist, NCC-NSC
Richard Grünewald (RG)	Neurologist, Royal Hallamshire Hospital
David Pitcher (DP)	Cardiologist, Worcester NHS Trust
Sanjiv Petkar (SP)	Clinical Research Fellow, Manchester Heart Centre
Alison Pottle (AP)	Cardiology Nurse Consultant, Harefield Hospital
Greg Rogers (GR)	General Practitioner
Julie Fear (JF)	Patient/Carer Representative, Syncope Trust & Anoxic Reflex Seizures (STARS)
Maggie Westby (MW)	Senior Research & Development Fellow, NCC-NSC
Sue Latchem (SL)	NICE Commissioning Manager

APOLOGIES:

Trudie Loban (TL)	Patient/Carer Representative, Syncope Trust & Anoxic Reflex Seizures (STARS)
Melesina Goodwin (MG)	Epilepsy Specialist Nurse, Northampton General Hospital
John Pawelec (JP)	Paramedic - Clinical Tutor, Yorkshire Ambulance Service NHS Trust
Garry Swann (GS)	Consultant Nurse, Birmingham Heartlands Hospital

1. Welcome, introduction and apologies

Paul Cooper welcomed members in attendance.

2. Minutes, declarations of interest and matters arising

PC reviewed the minutes from the last meeting. Asking if GDG members had any issues of accuracy or need for correction. No changes were made to the minutes.

Changes to current declarations:

Two GDG members made new declarations of interest

Action point: NCC with GDG members to update

PC thanked the group and asked for current declarations to be updated at lunchtime.

Matters Arising: Update of the epilepsy guideline

The GDG discussed the overlap between the TLoC guideline and the epilepsy guideline which is currently being updated.

Action point: SL to raise the GDG's concerns regarding the original Epilepsy Guideline with the technical team at NCC for Primary Care and facilitate GDG input into the scope of the epilepsy guideline update.

3. Illustrating the patient pathway using clinical scenarios

A role-play exercise was used to illustrate how clinicians working within general practice, emergency departments, and cardiology departments assess someone presenting with a TLoC.

Action point: NCC team to write up the methods and outcomes of the role-play exercise

4. Early stage diagnosis

The GDG discussed how they wanted to group the diagnoses that can cause TLoC .

5. Diagnostic protocol discussion

MW gave a presentation on evidence based methods for assessing diagnostic technologies. She then asked the GDG to provide further information on how each of the diagnostic tests should be reviewed, and discussed this with the group starting with 12-lead ECG.

The technical team then asked the GDG to reconsider the list of diagnostic investigations currently included in the clinical questions and to prioritise these to allow the technical team to focus on the areas where guidance is most needed for this population.

Action point: NCC to facilitate GDG discussion on the protocols for the remaining diagnostic tests between now and the next meeting

6. Date and time of next meeting: GDG Meetings 5 and 6, 4th and 5th December 2008, commencing at 10.00 a.m, Conwy Room, NICE, MidCity Place, High Holborn, London