Adult Clinical Neuropsychology
Information for patients
The Adult Clinical Neuropsychology department is based in the Russell Cairns Unit, in the West Wing of the John Radcliffe Hospital. It is part of the Trust-wide Psychological Medicine service.

The Adult Clinical Neuropsychology department provides a service to people (and their families) with illnesses or injuries that affect the brain and central nervous system. These include:

- stroke
- traumatic brain injury
- multiple sclerosis
- Parkinson’s disease
- dementia
- neuropathic pain
- epilepsy
- brain tumour.

Clinical Neuropsychology is concerned with the impact that these problems can have on a person’s thinking (e.g. memory), their mood and their behaviour.

You might be referred to the department for a number of reasons, including:

- to assist with the diagnosis of a neurological illness
- to assess the impact a head injury, stroke or tumour has had on your thinking or mood
- to help you cope with the stress of a neurological illness
- to evaluate your suitability for surgery
- to measure the effect of surgery or medical treatment
- to answer questions about whether you might be able to return to work or driving following an injury or illness
- to build a profile of your individual strengths and weaknesses, to plan the support needed to help you return to work or studying.

Oxford University Hospitals NHS Foundation Trust is a teaching hospital. This means you might be seen for your appointment by a Trainee Clinical Psychologist. They will be working under the supervision of a qualified Clinical Neuropsychologist.
What is a Clinical Neuropsychologist?

A Clinical Neuropsychologist is a Clinical Psychologist who specialises in working with people with illnesses and injuries affecting their central nervous system. Clinical Neuropsychologists are skilled in assessing the changes in thinking, mood and behaviour associated with neurological conditions.

What should I expect at the appointment?

This will depend on why you have been referred to the department. There are sections later in this leaflet which cover some of the different appointment types. Appointments may be for neuropsychological assessment, or for psychological assessment and therapy/stress coping.

For neuropsychological assessments (longer appointments from one and a half to three and a half hours) we ask you to bring a close friend or family member who knows you well, for the first part of the appointment.

For psychological assessments (usually appointments of one hour) it is not necessary to bring a friend or family member, unless you want to. In these appointments you will not complete any tests, but may fill out some questionnaires.

At the start of your appointment, the Neuropsychologist will ask you about any concerns you may have about of the way you are thinking, your mood, or your behaviour. This is also a chance for you to discuss your expectations for surgery (if this is the reason for your assessment). The Neuropsychologist will then ask you for some background information, such as the support you have available, your education and medical history.

In the second part of the appointment you will complete some neuropsychological tests with the Neuropsychologist or an assistant. These tests include a range of verbal and visual tasks, which allow the Neuropsychologist to measure functions, such as your memory ability.
What should I bring with me?

If you need glasses for reading, please bring them with you. Please also bring a list of your medication with you to the assessment.

Specialist clinics

You might have been referred for an assessment as part of the planning process for an operation. Or you might have been referred for help with coping with the stress of a neurological illness. More information about what to expect in these appointments is included in this section.

Stress Reduction Clinic – Mindfulness Based Cognitive Therapy

You will be offered a one hour appointment to meet with a Psychologist or Neuropsychologist, to discuss your situation and any concerns you may have about mood, anxiety or stress problems.

The Psychologist will complete an assessment with you of the problems you are having, and advise you on the best way ahead. This will include joining a Mindfulness course run by your Psychologist, or advice on referral elsewhere, if that would be more suitable for you.

Mindfulness is an evidence-based technique which has been shown to be an effective way of improving mood, reducing anxiety and coping better with stress. It is not ‘therapy’, but is a practical skill taught in a class which runs for eight weeks (one session a week).
Brain tumour psychological therapy

If you have a brain tumour, you may have been offered a one hour appointment to meet with a Psychologist. They will discuss your situation, as well as any concerns you may have about your mood, anxiety, stress or behaviour.

The Psychologist will complete an assessment with you of the problems you are having, and advise you on the best way ahead. This may include advice on coping strategies, a course of one-to-one psychological therapy, joining a group Mindfulness course run by your Psychologist, or advice on referral elsewhere, if that would be more suitable for you.

Epilepsy surgery

A neuropsychological assessment is a core part of the process that goes into planning surgery to relieve symptoms of epilepsy. Together with MRI scans and results of the EEG (electroencephalogram) recordings, the assessment provides your Consultant Neurologist with more information about your brain function. This will help with their decision about the specifics of the surgery and whether it would be beneficial for you.

You do not have to ‘pass’ the neuropsychological tests to be offered the surgery. Instead, the tests are used to build a profile of your thinking skills and provide a baseline measure to compare back to, following surgery.

After epilepsy surgery, you will be invited back for post-operative neuropsychology reviews at 6 weeks, 6 months, 2 years, and 5 years.
Awake craniotomy

If you are considering an awake craniotomy operation, you will be referred for neuropsychological assessment before your surgery, and again one year after surgery.

The results of this assessment will be fed back to your Neurosurgeon, along with any scans you have had, to help them decide how best to help you and to plan your surgery.

Deep brain stimulation surgery

A pre-surgical neuropsychological assessment is part of the pathway and planning process if you are being considered for deep brain stimulation surgery. This appointment is part of the multi-disciplinary assessment, which helps the team to determine whether or not deep brain stimulation surgery would be a suitable option for you. Being invited for the assessment does not mean that surgery will definitely go ahead. The final decision is taken by the team at a monthly meeting.

The Clinical Neuropsychologist will send a summary of the assessment and test scores to the consultant who leads the Functional Neurosurgery team. The multi-disciplinary team will then review the results from all the assessments you have been through. After the meeting, one of the team will be in touch with you to discuss the outcome of the process.
Neuromodulation surgery

A pre-surgical psychological assessment is part of the pathway if you are being considered for neuromodulation surgery. This includes:

• spinal cord stimulation
• dorsal root ganglion stimulation
• peripheral nerve stimulation
• occipital nerve stimulation.

This appointment is part of the multi-disciplinary assessment process, which helps the team to decide whether or not neuromodulation surgery would be a suitable option for you. Being invited for the assessment does not mean that surgery will definitely go ahead. The final decision is taken by the team at a monthly meeting.

The appointment involves meeting with a Clinical Neuropsychologist, to talk about the impact that pain has had on your everyday life. They will ask how you go about managing the pain, about your mood and your personal/work situation. The Clinical Neuropsychologist will also ask you about your expectations for the operation and the goals you want to achieve following surgery. We will then ask you to fill out three questionnaires in the waiting room before you leave, to assess your mood, disability and your perception of your pain.

The Clinical Neuropsychologist will write to your Consultant to give a summary of what was discussed during the assessment. The multi-disciplinary team will consider the results from all the assessments you have been through. They will then make sure you meet all the criteria for the procedure.

There are a number of possible outcomes from the multi-disciplinary team’s discussion. One outcome is that you are placed on the waiting list for surgery.
At a later date you will be invited for a final pre-operative medical assessment in a nurse led clinic. If there are any issues that emerge from the assessment, you may need to complete some tasks or reach some goals (such as weight loss or a reduction in blood pressure) before surgery. This will increase your chance of having a better outcome from the operation.

After the meeting, a letter will be sent to your GP detailing the outcome of the process and what the next steps will be.

**Website**

Please visit the hospital website for further information about the support the Adult Clinical Neuropsychology service can provide:

Website: [www.ouh.nhs.uk/psychologicalmedicine/services/neurosciences.aspx](http://www.ouh.nhs.uk/psychologicalmedicine/services/neurosciences.aspx)

**Feedback**

The Russell Cairns Unit is committed to compassionate excellent and to providing the very highest standards of care. If you would like to make a comment or have a concern about the service you have received please contact us.
How to contact us

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If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call 01865 221 473 or email PALS@ouh.nhs.uk

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