AMB Order Panel: Polyneuropathy

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Date approved:	6/2/22	Last Review:	6/1/22
References:	UTD		
OSQ codes:	521717, 521718, 521722, 521741		

Content:

- Most common causes: Diabetes mellitus, alcohol abuse, HIV infection,
 - Additional Common Systemic causes: ESRD, Critical Illness, Amyloidosis, hypothyroidism, Vitamin deficiencies, Lyme disease, Monoclonal gammopathy
 - Autoimmune: Guillain Barre
 - Toxic: Alcohol, chemotherapy, heavy metals
 - Hereditary: Charcot Marie Tooth
 - Environmental: prolonged cold exposure, hypoxemia, vibration induced nerve damage
 - Idiopathic

Extensive diagnostic testing is probably not necessary in a patient with mild symptoms who has a known underlying cause of neuropathy (eg, diabetes mellitus, alcohol abuse, or chemotherapy). However, a diagnostic evaluation is warranted in patients with no clear etiology or in whom symptoms are severe or rapidly progressive. In addition, a full diagnostic evaluation should be pursued in patients with atypical features, including asymmetry, non-length dependence, motor predominance, acute onset, or prominent autonomic involvement.

Orders:

- Initial Labs: B12, CBC, TSH w/reflex, CMP, Hgb A1C, ANA, ESR, SPEP, UPEP,
- Optional labs: HIV, Light Chain, Urine Heavy Metals, Urine Porphyrins, RF, B1/Thiamine, MMA, Homocysteine, Hep C and B screening, GGT
- NCS referral
- Neurology referral