



## CONFIDENTIAL SURVEILLANCE OF POST HERPETIC NEURALGIA IN PAIN CLINICS: QUARTERLY RETURN

### Quarterly return for:

Pain clinic name: \_\_\_\_\_

Clinician name: \_\_\_\_\_

Quarter/Year: \_\_\_\_\_

Please record the ID number of **all newly identified cases** of post herpetic neuralgia \* in patients aged 70 years or older that you have seen in the **last quarter**.

If **no new cases** please tick box

Hospital number	** Full name code (see below)	Age	Gender

\* Case definition: Nerve pain which persists for 3 months following the resolution of the shingles cutaneous eruption

\*\* Full name code is the first two letters of the first name and the first two letters of the surname i.e. John Smith is JOSM and Ian de Souza is IADE