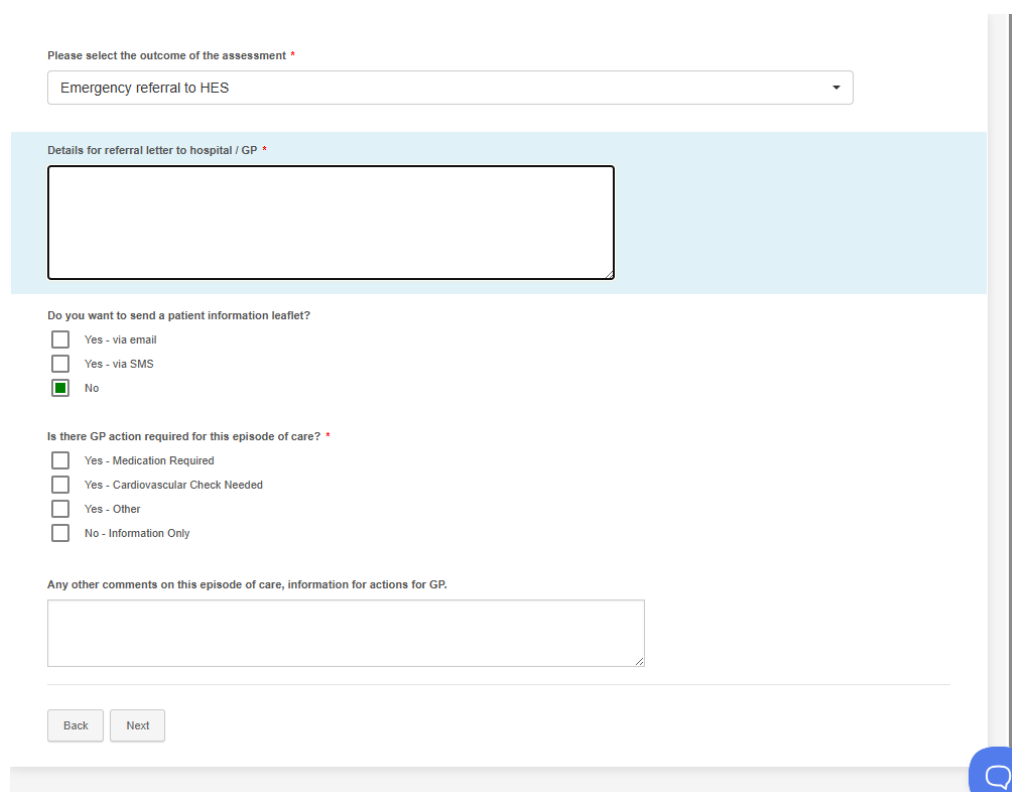


## How to refer as an emergency following a CUES appointment

On the final page of the CUES assessment, you can select the referral outcome 'Emergency referral to HES' from the drop-down menu. Please fill in the box below with all relevant information required for the emergency referral letter, as the full episode is no longer used to generate the referral report (see Appendix):



Please select the outcome of the assessment \*

Emergency referral to HES

Details for referral letter to hospital / GP \*

Do you want to send a patient information leaflet?

☐ Yes - via email

☐ Yes - via SMS

☒ No

Is there GP action required for this episode of care? \*

☐ Yes - Medication Required

☐ Yes - Cardiovascular Check Needed

☐ Yes - Other

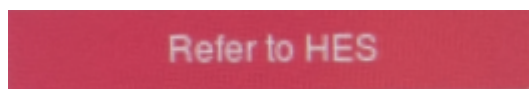
☐ No - Information Only

Any other comments on this episode of care, information for actions for GP.

Back Next

Chat icon

Once you have completed the CUES episode, under 'Manage Referrals' the episode will show a red 'Refer to HES' box.



Click this box, review patient details and progress to selecting a provider. As you have selected 'Emergency' at the episode, the drop down menus will have auto selected Emergency Eye Services options. Providers will be listed by closest geographic location to the patient.

Once you have selected a provider, you can upload any relevant information or images on the following page. You can then submit the referral.

The referrals are sent to the NHS net inbox of each emergency eye department, with the urgency (in this case, emergency) specified.

Please follow local protocols for each department as appropriate.

**University Hospital Southampton**

Email – [Eye\\_emergency@uhs.nhs.uk](mailto:Eye_emergency@uhs.nhs.uk)

*If you feel your patient needs same day assessment please do not send the patient directly to hospital. Please call the telephone triage line (**023 8120 6592** option 8 for health professionals to skip the queue) who will be able to advise.*

Email is monitored 7 days/week 8am-7pm

# Royal Hampshire County Hospital

*Email:* [neck@hhft.nhs.uk](mailto:neck@hhft.nhs.uk)

Referrals via email only.

May 2025

Clinic runs Monday to Friday, 9am to 5pm.

### **Basingstoke and North Hampshire**

Email: [EmergencyEyes@hhft.nhs.uk](mailto:EmergencyEyes@hhft.nhs.uk)

Phone: 01256 313572 Admin team: 01256 313127

If no answer is obtained: In hours – the on-call consultant should be contacted through the main hospital switchboard. Out of Hours (evenings and weekends) call Frimley Park Hospital or University Hospital Southampton

**You MUST call Basingstoke before any referral is made to their inbox. The inbox is not monitored routinely**

### **St Mary's Hospital Isle of Wight**

Email: [iownt.opth-referrals@nhs.net](mailto:iownt.opth-referrals@nhs.net)

Mon to Fri call 01983 534204 for the eye department direct line or call 01983 822099 and ask for the doctor on call if outside normal working hours

### **Royal Bournemouth**

Bournemouth no longer accept referrals by email, all emergency referrals must use the telephone triage. As a result, you cannot select Bournemouth as an option on OPERA and must close the episodes using the 'empty chair' icons and select 'Referred outside of OPERA'

Telephone: 0300 0196039

## Appendix

### CUES Module Referral Update

Referral letters now do not have an attachment of the complete document bundle. The letter is constructed by pulling key information from the OPERA module, including:

- Referral Urgency
- Referral Sub-speciality Clinic
- Patient Details
- GP Practice
- Optical Practice
- Assessment Date
- Outcome
- Diagnosis
- Visual Acuity
- Clinical Comments
- Recommended Medications
- Patient Factors



#### URGENT REFERRAL Ophthalmology: Vitreoretinal

09/04/2025

Dear Doctor,

The following patient has been seen within the Community Urgent Eyecare Service (CUES).

Patient Details	WOLVES XXTEST / 28-10-1982 / XXXXXXXX Waiting for population Waiting for population WV10 0QP /
NHS Number	Waiting for population /
	Waiting for population
GP Practice	WOLVERHAMPTON ROAD ST17 4BS
Optical Practice	PRIMARY EYECARE SERVICES LTD 0330 128 1544
Assessment Date	09/04/2025
Outcome	Refer On: Urgent Referral to HES
Diagnosis	WET AGE-RELATED MACULAR DEGENERATION (AMD) - LEFT EYE
Visual Acuity Un-corrected	Right 6/9.5 Left 6/5
Comments	Please ensure all clinical details and referral instructions are included in this box to support the referral being generated.
Recommended Medications	No Medications Recommended
Patient Factors	Mental health issues; Sight loss

Kind Regards,

XXXXXX

All essential supporting clinical information and observations that will be added to the referral letter must be added to the following box:

Please select the outcome of the assessment \*

Urgent Referral to HES

Select clinic type for your referral

Vitreoretinal

Details for referral letter to hospital / GP \*

Please ensure all clinical details and referral instructions are included in this box to support the referral being generated.

