

Ophthalmology Urgent Referral from Optometrist

(Urgent Referral Clinic contact number for GPs 01384 456111 EXT 3633)

Patient Details			
NHS Number:	To be seen on same day <input type="checkbox"/> or 2 working days <input type="checkbox"/>		
Surname:	Date of Birth:	Age:	
First Names:	Country of Birth: <input type="checkbox"/>		
Address:	Home Telephone: Mobile Telephone: Work Telephone:		
GP Details		Optometrist Details	
Referring GP Name:	Optom Name:		
National Practice Code:	Practice:		
Address:	Address		
Telephone Number:	Phone:		
History			
Brief history:			
Has the patient visited the eye clinic in the past? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Has the patient had previous eye surgery? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes specify			
Ocular history: Contact lens wearer <input type="checkbox"/> Uveitis <input type="checkbox"/> Glaucoma <input type="checkbox"/> Episcleritis <input type="checkbox"/> Corneal ulcers <input type="checkbox"/> Cataract <input type="checkbox"/> ARMD <input type="checkbox"/>			
Ocular comments:			
Ocular findings: Lid swelling <input type="checkbox"/> Conjunctival redness <input type="checkbox"/> Foreign bodies <input type="checkbox"/> Proptosis <input type="checkbox"/> Fluorescein uptake <input type="checkbox"/> Red reflex <input type="checkbox"/>			
Ocular findings comments:			
Cornea status: Normal <input type="checkbox"/> Abnormal <input type="checkbox"/> Fluorescein uptake overlying corneal abnormality <input type="checkbox"/>			
Pupil status: Normal <input type="checkbox"/> Abnormal <input type="checkbox"/> RAPD <input type="checkbox"/> Unequal sizes <input type="checkbox"/>			
Eye movement: Normal <input type="checkbox"/> Abnormal <input type="checkbox"/>			
Symptoms			
How quick were the onset of symptoms? Sudden <input type="checkbox"/> Gradual <input type="checkbox"/> Incidental <input type="checkbox"/>			
Visual acuity: Right eye Left eye			
Decrease in vision:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Loss of vision:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Pain:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Redness:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Discharge:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Flashing lights:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Floaters:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Photophobia:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Double vision:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Lid swelling:	Nil / RE / LE / Both	For how long	Worsening <input type="checkbox"/>
Other symptoms:			
Provisional diagnosis:			

Ophthalmology Urgent Referral (REAR)

To the GP Surgery - This is an Urgent Referral to Ophthalmology from an Optometrist.
Please enter the information on an Urgent ERS for Ophthalmology and transmit same day.

For the Optometrist:

Please consult the Urgency of Referral Guidelines by Condition and ensure as much information as possible is entered onto the urgent referral form to ensure appropriate management.

- Complete the Urgent Referral Form with the patient present and ensure all aspects of history and symptoms are recorded.
- Give the Urgent Referral Form to the patient and instruct the patient to take it immediately to their GP surgery and request the practice to transmit the form that day to the URC.

The ERS form is likely to be completed by a non-medical member of staff so it is essential that the Optometrist ensures any writing on the form is clearly legible.

- The URC will Triage and contact the patient in due course (usually that day) to arrange an appointment in a timescale recommended by the consultant based on the information provided on the form.

Advice to Patients

Optometrists must not cause undue concerns for patients by indicating a timescale for their appointment as this will be decided by the consultant based on the information on the referral.

Outcomes from the Referral will be sent to the GP and the patient, so if the Optometrist requires feedback ask the patient to share their letter.