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| **UHL Virtual Medical Retina Question Pathway****Please send your completed form through your NHS.net account to** medretuhl@uhl-tr.nhs.uk **and we aim to reply with the most appropriate management decision within 72 hours** |

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| Patient Name |  | Previous Ocular History and associated ocular findings including any previous BCVA |  |
| Date of Birth |  |
| Gender |  |
| BCVA | RE (PH)  | LE (PH)  |
| Symptoms? |  | General Health |  |
| Onset? |  |
| Changes since onset? |  |
| Any other relevant information |
| **Question** |  |

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| **Patient Summary** | **Fundus image** |
| **OCT Image(s)**  | **OCT Image(s)**  |
| **OCT Image(s)**  | **OCT Image(s)** |