

LINCOLNSHIRE OPTOMETRIST REFERRAL GUIDELINES (08.11.2022)

SERVICE	HOSPITAL EMERGENCY EYE CASUALTY DIRECT (COMPLETE THE EYE CASUALTY CLINIC FORM)	HES URGENT (PLEASE COMPLETE GOS18 FORM TICK URGENT OR WET AMD REFERRAL FORM)	ALL ROUTINE REFERRALS via ELECTIVE ACTIVITY CO-ORDINATION HUB (EACH) (PLEASE COMPLETE GOS18 FORM) Please do not request GPs to make routine HES referrals	NO REFERRAL REQUIRED
ROUTE	<p style="text-align: center;">Please telephone</p> <p>Lincoln: 01522 572292 Email: Eye Casualty Clinic Form to: ophthalmology.casualtyreferrals@uh.nhs.uk Boston: 01205 446619 Email: Eye Casualty Clinic Form to: uh.rod@nhs.net</p> <p>Out of hours (before 9am or after 5pm Monday to Thursday, and after 10am on a Friday) 01522 512512</p>	<p>Email: GOS18 referral form. For Wet AMD use the Wet AMD referral form to: Lincoln: ulh.ophtalmologysecretarieslincoln@nhs.net Boston: ulh.rod@nhs.net</p>	<p>Email: icb.referrals.linc@nhs.net Enquires email: icb.linc@nhs.net Patient contact number: 01522 309500 Professionals contact number: 01522 421926 DO NOT GIVE TO PATIENTS</p>	NONE
CATEGORY OF CONDITIONS	URGENCY	AROUND 1 WEEK	WEEKS	NONE
TRAUMA	chemical burn (irrigate first) / soft eye / hyphaema / vision loss / irregular pupil / laceration of lid margin / severe proptosis	Mild pain / photophobia	symptomatic + chronic redness / discharge (PWSI)	mild sub-conj / lid haemorrhage
RED INFLAMED EYE	corneal ulcer / vision loss / irregular pupil/ severe pain / hypopyon	Herpes zoster + eye involvement / Facial palsy + corneal exposure	Chronic inflammation / entropion / ectropion	asymptomatic + chronic redness / discharge
EYELIDS	acute severe swelling with reduced ocular movements/ proptosis	Irritating sutures + inflammation	CSS referrals for non-malignant persistent cysts	
CORNEA	corneal graft + mild Inflammation / vision loss, corneal ulcer	Acute diplopia	opacity / vision loss contact lens problem	asymptomatic pterygium
OCULAR MOVEMENTS	acute diplopia + pupil change / bad headache		chronic diplopia child squint / amblyopia	asymptomatic adult squint
ORBIT	acute severe swelling with reduced ocular movements / proptosis suspect giant cell arteritis + normal vision		chronic proptosis	Small flat naevus with no suspicious features – see College of Optometrist CMG
CATARACT	IOP >32 + symptoms of closed angle	IOP >32	symptomatic vision loss and VA 6/12 or worse** - only refer if patient is prepared to have surgery.	asymptomatic opacity OR not keen for surgery
IOP / GLAUCOMA			ocular hypertension / glaucoma / glaucoma suspect (fields / IOP's / Disc assessment details must be included)	
VISION / FIELD LOSS	acute vision loss / acute flashes / floaters Papilledema	recent distortion***/ macular haemorrhages***	chronic unexplained vision loss	chronic flashes / floaters (more than 3 months)
DIABETES		Proliferative	Non-urgent Maculopathy	

NOTES

FOR GP INFORMATION & ACTION ONLY	Information for GP / action for GP to be sent direct to GP
FAILSAFE OFFICERS: PATIENTS LOST TO FOLLOW UP WHO ARE ALREADY UNDER HES	<p>Email enquiry to: ophthalmologyfailsafeteam@nhs.net Below are the number that patient can use to enquiry about Lost to follow up appointments who are currently under HES care:</p> <ul style="list-style-type: none"> • PaedS/VR: 01522 421503 • Oculoplastic/Neuro: 01522 458636 • Medical Retina: 01522 309675 • Glaucoma: 01205 333499 • General: 01205 333581
PATIENT APPOINTMENTS / UPDATE PATIENT INFORMATION / MEDICATION QUERIES / GENERAL QUERIES	<p>Please contact the Medical Secretaries on: Lincoln – 01522 307180 Boston – 01205 445203</p> <p>These number can be shared with patients</p>
COMMUNITY OPTOMETRY TRIAGE ASSESSMENT AND TREATMENT SERVICE (COTATs)	<p>All routine referrals are triaged by the COTATs service within the EACH. The triage will signpost all appropriate patients to the COTATs service to support their HES colleagues and reduce demand on HES services.</p>
ELECTIVE ACTIVITY CO-ORDINATION HUB (EACH)	<p>Email: licb.referrals.lincolnshireeach@nhs.net. Email enquiries: licb.lincolnshire.each@nhs.net</p>
EYE CARE LIAISON OFFICERS (ECLO)	<p>Patients who might benefit from support, advice or information with any aspects of sight loss can be referred to the RNIB ECLO Service via an nhs.net email to rnib.eclo@lincolnshire.nhs.net:</p> <ul style="list-style-type: none"> • Once the referral has been received this will be acknowledged • The patient will be contacted within 3 working days • Feedback on your referral can be requested • As well as name, DOB, address and contact number of the patient it would be very helpful to also state eye condition, visual acuity, any hearing impairment, and support needs identified so far.
LINCOLNSHIRE SENSORY SERVICE	<p>Email: contact@lincolnshiresensoryservices.org.uk</p>
LOW VISION AID ASSESSMENTS	<p>Refer to the following email address: licb.referrals.lincolnshireeach@nhs.net.</p>
CATARACT REFERRALS	<ul style="list-style-type: none"> • Patients with a best corrected visual acuity of 6/12 or worse in either the first or second eye AND as a result of the cataract have impairment in lifestyle such as substantial effect on activities of daily living, leisure activities, or increased risk of falls. OR • With a best corrected visual acuity of 6/9 in the worst eye where exceptional acuity is essential for their occupation (e.g. HGV licence holders) or results in debilitating symptoms such as distortion or glare • Cataract surgery is indicated irrespective of visual acuity for patients who have ocular co-morbidities e.g. glaucoma, diabetic retinopathy or symptomatic anisometropia <p>Prior approval of funding is required for all patients who need cataract surgery but do not meet one of the above criteria.</p>
AGE RELATED MACULAR DEGENERATION	<p>For suspected wet AMD please use the wet AMD Referral Form. For retinal vein occlusions please use wet AMD referral form to the Medical Secretaries: Lincoln: ulh.ophthalmologysecretarieslincoln@nhs.net Boston: ulh.ROD@nhs.net</p>
COMMUNITY SURGICAL SCHEME	<ul style="list-style-type: none"> • ICB guidelines indicate that symptomatic benign lid cysts should be referred to the Community Surgical Scheme (CSS) in the first instance for patients over 16 years of age. • Prior approval is required from the ICB before blepharoplasty and direct brow lift surgery can be carried out on the NHS
<p>The ocular conditions listed in this document are intended to reflect those that might be encountered in community practice. This document is not intended to be exhaustive. The suggestions for referral have been devised for GUIDANCE only. The document does not remove the practitioner's professional responsibility to each patient, who should be dealt with on an individual case basis.</p>	

Reviewed: Nov 22

Next Review: May 23