# Ophthalmology

# Outpatient service information, triage and referral guidelines

### **Description of service:**

Ophthalmology services are provided at The Royal Adelaide Hospital and The Queen Elizabeth Hospital.

Our outpatient services are multi-disciplinary units which provide assessment, management and treatment for all sub-specialty areas of adult ophthalmology.

#### Services provided:

#### **Royal Adelaide Hospital**

- > Oculoplastic and orbital surgery
- > Ocular oncology
- > Neuro-ophthalmology
- > Medical and Surgical retinal
- > Corneal and external diseases
- > Glaucoma
- > Cataract
- > Adult squint and squint surgery
- > Advanced diabetic eye disease
- > Ocular and adnexal trauma
- Management of emergencies via daily emergency clinics

#### Services provided:

#### The Queen Elizabeth Hospital

- > Corneal and external diseases
- > Cataract
- > Refractive surgery
- > Medical retina
- > Oculoplastic surgery
- > Glaucoma
- > Diabetic eye disease
- > Neuro-ophthalmology
- Management of emergencies via daily emergency clinics

#### **Exclusions:**

- > Prescriptions of glasses in adults
- > Driver's license forms / assessments
- > Paediatrics

For admission or URGENT advice contact the ophthalmolog	v Registrar
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Royal Adelaide Hospital (RAH) The Queen Elizabeth Hospital (TQEH) Ph: (08) 7074 0000 Ph: (08) 8222 6000

Alternatively, if the problem is urgent and the patient is unstable, the patient should be sent directly to the Emergency Department of the nearest hospital for assessment.

For more information or to make a referral contact						
Royal Adelaide Hospital (RAH)	Fax: (08) 7074 6247	Ph: 1300 153 853				
The Queen Elizabeth Hospital (TQEH)	Fax: (08) 8222 7188	Ph: 8222 7030 / (08) 8222 7020				

#### **Essential Referral Content**

#### Demographic

- > Date of birth
- > Contact details (including mobile phone)
- > Referring GP details
- > Interpreter requirements
- > Medicate number

## Adult Triage Criteria for referral

#### Clinical

- > Reason for referral
- > Duration of symptoms
- > Relevant pathology and imaging reports
- > Past medical history
- > Current medications

Adult mage Criteria for referral						
Emergency All urgent cases must be discussed with the on call ophthalmology registrar.	<b>Category 1</b> All urgent cases must be discussed with the on call ophthalmology registrar.	Category 2 Target within 3 months	Category 3 Target 6-12 months			
<ul> <li>Acute angle closure glaucoma</li> <li>Central retinal artery occlusion</li> <li>Chemical injury</li> <li>Conjunctivitis &gt;1/52</li> <li>Conjunctivitis with pain</li> <li>Corneal ulceration</li> <li>Flashers / floaters with field loss,</li> <li>retinal detachment</li> <li>Orbital cellulitis / acute dacryocystitis</li> <li>Periocular herpes simplex/herpes zoster infection</li> <li>Post-operative / post intra-ocular injection inflammation</li> <li>Pupil changes</li> <li>Red eye in contact lens wearer</li> <li>Sudden loss of vision or diplopia</li> <li>Sudden onset of blurred vision with headaches</li> <li>Acute loss of visual field</li> <li>Suspected penetrating eye injury</li> <li>TIA / amauroisis fugax</li> <li>Trauma to eye/orbit</li> <li>Uveitis</li> <li>Sudden onset of double vision</li> </ul>	<ul> <li>&gt; Acute dacryoadenitis</li> <li>&gt; Diabetes if with recent visual loss</li> <li>&gt; Distortion or vision loss in ARMD patient.</li> <li>&gt; Elevated intraocular pressure ≥ 30 mmHg</li> <li>&gt; Eye pain</li> <li>&gt; Flashes / floaters without field loss</li> <li>&gt; Proptosis with visual changes</li> <li>&gt; Ptosis if pupil occluded</li> <li>&gt; Severe light sensitivity</li> <li>&gt; Squint if red reflex abnormal or lack of visual response</li> <li>&gt; Known diabetic with drop in vision</li> </ul>	<ul> <li>Cataract with vision &lt;6/12 in better eye</li> <li>Elevated Intraocular pressure &lt;30 mmHg</li> <li>Eye discharge without redness</li> <li>Eyelid problems: ectropion / entropion / ptosis.</li> <li>Eyelid tumours</li> <li>Glaucoma suspects high risk (high cup-disc ratio, glaucomatous visual field defect, shallow anterior chamber).</li> <li>Proptosis without visual issues (Thyroid eye disease)</li> <li>Severe dry eyes (Sjogren's, Rheumatoid arthritis)</li> </ul>	<ul> <li>&gt; Annual chronic disease review</li> <li>&gt; Age related macular degeneration without visual distortion.</li> <li>&gt; Blepharitis / dry eye</li> <li>&gt; Cataracts with vision better than 6/12 in better eye</li> <li>&gt; Glaucoma suspects low risk (normal cup-disc ratio, family history)</li> <li>&gt; Routine keratoconus</li> <li>&gt; Other eyelid lumps</li> <li>&gt; Referral for ongoing care from elsewhere</li> <li>&gt; Screening for eye disease</li> <li>&gt; Systemic eye disease</li> <li>&gt; Vision &lt;6/12 for any reason other than refractive</li> <li>&gt; Watery eyes</li> </ul>			

#### For more information or to make a referral

Royal Adelaide Hospital: OPD Level 3G wing 5 Referral Fax Number: (08) 7074 6247 Phone Number: 1300 153 853

The Queen Elizabeth Hospital: Level 7 Eyes OPD Referral Fax Number: (08) 8222 7188 Phone Number: (08) 8222 7020

Web: www.sahealth.gov.au

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Prof Henry Newland

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