

OUTPATIENT SERVICE DESCRIPTION & TRIAGE GUIDELINES

OPHTHALMOLOGY

Southern Adelaide Local Health Network (SALHN)

Description of Service

Ophthalmology services are provided at Flinders Eye Clinic, a public clinic located at Flinders Private Hospital

Services provided

- General ophthalmology
- Cataract
- Glaucoma
- Medical and surgical retina
- Uveitis
- Paediatrics
- Neuro-ophthalmology
- Cornea and external diseases
- Management of emergencies via daily emergency clinics
- Private and tertiary referrals are also accepted

Services not provided

- Prescription of glasses in adults
- Driver's license forms/assessments

For admission or **URGENT** advice contact the Ophthalmology Registrar

Flinders Medical Centre (FMC)

Ph: 8204 5511

For Appointments contact the Ophthalmology Clinic on

Flinders Medical Centre (FMC)

Fax: 8404 2040

Adult Triage Criteria for Referral

| Emergency <small>Referrer must contact the Registrar to arrange appointment in emergency clinic</small> | Category 1 Target within 2 weeks | Category 2 Target within 3 months | Category 3 Target 6-12 months |
|---|---|---|--|
| <ul style="list-style-type: none"> • Acute angle closure glaucoma • Central retinal artery occlusion • Chemical injury • Conjunctivitis >1/52 • Conjunctivitis with pain • Corneal ulceration • Flashes/floaters with field loss • Orbital cellulitis • Periocular Herpes Simplex / Herpes Zoster infection • Post-operative/Post intraocular injection inflammation • Pupil changes • Red eye in contact lens wearer • Sudden loss of vision • TIA/Amaurosis Fugax • Trauma to eye/ orbit • Uveitis | <ul style="list-style-type: none"> • Acute Dacryocystitis • Acute loss of visual field • Distortion or vision loss in Age Related Macular Degeneration patient • Elevated Intraocular pressure ≥ 30 mmHg • Eye Pain • Flashes/floaters without field loss • Proptosis with visual changes • Severe light sensitivity • Sudden onset of double vision | <ul style="list-style-type: none"> • Age Related Macular Degeneration without visual distortion • Cataract with vision <6/12 in better eye • Elevated Intraocular pressure <30 mmHg • Eye discharge without redness • Eyelid problems- ectropion/entropion/ ptosis • Eyelid tumors • Glaucoma suspects high risk (High Cup-Disc ratio, glaucomatous visual field defect, shallow anterior chamber) • Known Diabetic with drop in vision • Proptosis without visual issues (Thyroid Eye Disease) • Severe dry eyes (Sjogren's, Rheumatoid arthritis) | <ul style="list-style-type: none"> • Annual chronic disease review • Blepharitis /dry eye • Cataracts with vision better than 6/12 in better eye • Drug related side effects • Glaucoma suspects low risk (Normal Cup-Disc ratio, family history) • Keratoconus • Other eyelid lumps • Referral for ongoing care from elsewhere • Screening for eye disease • Systemic eye disease • Vision < 6/12 for any reason other than refractive • Watery eyes |

| Version | Date from | Date to | Amendment |
|---------|-----------|----------|------------------------|
| 1 | Feb 2014 | Oct 2014 | |
| 2 | Oct 2014 | Oct 2016 | Reformat and review |
| 2.1 | Nov 2016 | Nov 2018 | Review |
| 2.2 | Nov 2017 | Nov 2019 | Removal of RGH details |

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Paediatric Triage Criteria for Referral

| Emergency Referrer must contact the Registrar to arrange appointment in emergency clinic | Category 1 Target within 2 weeks | Category 2 Target within 3 months | Category 3 Target 6-12 months |
|--|---|--|--|
| <ul style="list-style-type: none"> • Acute neurological disease with ocular implications • Non accidental injury • Ophthalmia neonatorum (Conjunctivitis within 1 month of birth) • Orbital cellulitis/ dacryocystitis/ preseptal cellulitis • Sudden loss of vision at any age • Trauma to eye or orbit | <ul style="list-style-type: none"> • Acute red eye • Anisocoria (difference in pupil size) • Anterior segment anomalies eg coloboma, aniridia • Blind infant or suspected poor vision any age in either eye • Haemangioma • Nystagmus • Nasolacrimal duct obstruction with mucocele • Photophobia • Severe ptosis or lid abnormality • Strabismus <18mths • Sudden onset strabismus • Suspected infantile/ congenital cataract • Suspected infantile/ congenital glaucoma • White pupil at any age | <ul style="list-style-type: none"> • Abnormal head posture • Autism spectrum disorder • Chalazion < 4yrs • Diabetes - routine screening • Disease and syndromes with ocular associations • Ex preterm babies • Juvenile rheumatoid arthritis • Learning difficulties • Oncology patients- Pre/Post BMT / Post RT / visual pathway involvement with tumour • Sensori - neural hearing loss • Strabismus >18 months but < 9yrs | <ul style="list-style-type: none"> • Chalazion >4yrs • Nasolacrimal duct obstruction without mucocele • Refraction only in children > 5yrs, ie children who just need glasses (should see optometrist) • Strabismus >9yrs |

General Information to assist with referrals and the and Referral templates for FMC are available to download from the SALHN Outpatient Services website www.sahealth.sa.gov.au/SALHNoutpatients