

Frequently Asked Questions – Ophthalmology Emergency Referral

Q. What should I do if I have a patient with an eye emergency, presenting “out of hours”, that is after 18.30hrs weekday and at weekends?

A. There is a Doctor on call for eye emergencies “out of hours” who can be contacted, via switchboard at Burnley General Hospital, 01282 425071; you will still need to also follow this up with a referral emailed to ward6aereferrals@elht.nhs.uk

Q. If I ring the ophthalmology emergency hot line, who will I speak with; will it be a Doctor or Nurse?

A. It will be an Ophthalmic Nurse; all of whom are specialists trained and highly experienced. The nurse will undertake triage but is able to consult with an Ophthalmology doctor, as and when necessary.

Q. Do I always have to ring the “in hours” referral through to the urgent “hot line”?

A. No, this is at your discretion but you **always** need to email the completed urgent referral proforma

Q. Will I always have to use the ophthalmology urgent referral proforma?

A. Yes, it is essential that the urgent referral proforma is completed, to the best of your ability, at your assessment with the patient; this will assist you with clinical decision making on the urgency and relevance of referral and will provide ophthalmology with as much relevant and accurate clinical information, from which to effectively triage the urgent referral.

Q. What information should a referring GP provide?

A. As a **minimum** the referring GP **must** provide the visual acuity for each eye and describe whether the pupils act normally or not as well as the standard patient information.

Q. Where do I email the urgent referral and how will I know it has been received and read?

A. Referrals need to be emailed to ward6aereferrals@elht.nhs.uk if the referrer wishes to know when the emailed urgent referral is delivered & read, and then he/she must select this option on their computer, before sending the referral.

Q. How often will urgent referrals to ward6aereferrals@elht.nhs.uk be read?

A. Emailed urgent referrals, received in the ward6 inbox, will be triaged every 2 hours, as a maximum during Mon-Fri 9.00 – 18.30. Referrals received out of these days/hours will be triaged, within 2 hours of the start of the next working day. **Note: you must not batch urgent referrals at the end of the day but send each urgent referral at the time of seeing the patient during the day**

Q. If the triage outcome identifies the need for an urgent ophthalmology appointment, when will this take place?

A. Ophthalmology will contact the patient and offer an urgent appointment within a time frame appropriate to their needs; the patient will be offered choice of a maximum 2 urgent appointments; if unable to attend either of the 2 urgent appointments, they will be discharged back to the referrer, as will those who DNA.

Q. If the triage outcome identifies non-urgent need, what will happen to my referral?

A. The referral will be returned to the referrer, with triage feedback. If the referrer then considers the need for a routine referral, then this will follow the normal C&B pathway.

Q. Will my urgent referral patterns be monitored?

A. Yes, Ophthalmology will keep records on the volume and appropriateness of all urgent referrals. Findings will be shared with EL CCG and, where appropriate, the information will be used to inform learning and education plans, for referrers.