

Referral process for urgent neuro-ophthalmology patients

1. The neuro-ophthalmology team at Queen Elizabeth Hospital Birmingham (QEHB) recognises the importance of management of urgent cases from the emergency department of the Birmingham and Midland Eye Centre (BMEC).
2. This document **only relates to emergency cases requiring urgent intervention** by neuro-ophthalmology at QEHB. **Routine cases will be rejected if put through this process.**
3. The numbers of patients will be audited to ensure patient safety and good governance.
4. The aim is to ensure urgent care for those patients with life or sight threatening problems.
5. The following is the referral route:
 1. Patient is seen at the ED in BMEC.
 2. A thorough history and examination pertaining to neuro-ophthalmology is required.
 3. The key tests required are: **(These need to be adequately documented and communicated)**
 - i. Vision
 - ii. Colour vision
 - iii. Pupil assessment
 - iv. Formal visual fields in afferent disorders
 - v. Dilated funduscopy
 - vi. Eye movement examination (including orthoptic assessment in cases of diplopia)
 - vii. OCT Macula, Disc RNFL and Disc volume in appropriate cases.
 4. A senior decision maker (BMEC consultant eye surgeon, senior ST trainee or post-CCT fellow) should see the patient to confirm the findings.
 5. A telephone referral should be made to the neuro-ophthalmology emergency telephone / bleep at QEHB, accessed through UHB switchboard.
 6. If transfer is agreed, this should be followed by an email referral to oph-referral@uhb.nhs.uk including all documentation and an export of the relevant OCT images (e.g. tif showing the maximum optic disc height on disc volume and peripapillary OCT showing total retinal thickness in cases of papilloedema).
 7. Non-urgent referrals should be put through normal electronic referral pathways.
 8. Referrals without complete information, specifically investigation results, will be rejected.
 9. Routine referrals sent to oph-referral@uhb.nhs.uk, or email referrals not accepted in a prior telephone call will be rejected.
 10. For inpatients admitted to a medical or surgical ward any referral to neuro-ophthalmology should be made by the ophthalmology team at BMEC following his pathway after review.