



## Ophthalmology Referral - Prince of Wales Outback Eye Service

**Bourke** Health Service fax: 6870 2680, **Brewarrina** Health Service fax: 6839 2822, **Cobar** Health Service fax: 6879 9580,  
**Lightning Ridge** Health Service fax: 6820 5780, **Walgett** Health Service fax: 6817 9480

Phone: 0418 322 705 (Joanna) 0419 111 687 (Ben), 0424 446 587 (Elyssa) for ALL general enquiries  
We accept referrals by fax to your preferred clinic location or email: [Elyssa.Brennan@health.nsw.gov.au](mailto:Elyssa.Brennan@health.nsw.gov.au)  
If the appointment is **urgent** please phone Joanna/Ben for next clinic availability.

<b>Referral to:</b> Outback Eye Service - Ophthalmologist		<b>Referral Date:</b> / /	
<b>Patient Details:</b> <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other			
<b>Surname:</b>		<b>Given Name/s:</b>	
<b>Date of Birth:</b>	/ /	<b>Gender:</b>	
<b>Email:</b>		<b>Medicare number:</b>	Ref: / Exp: /
<b>Contact Number/s:</b>		<b>Interpreter Required?</b>	Yes/ No Language:
<b>Indigenous Status:</b>	<input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both <input type="checkbox"/> Neither		
<b>Postal Address:</b>	Suburb/Town: Post code:		
<b>Next Of Kin:</b>		<b>Contact Number/s of N.O.K:</b>	
<b>Relationship:</b>			

*Please note: Incomplete referrals will not be triaged. We strongly encourage a full optometry review prior to referral.*

<b>Clinical Reason for Referral:</b> <input type="checkbox"/> Cataract <input type="checkbox"/> Glaucoma <input type="checkbox"/> Diabetic Retinopathy <input type="checkbox"/> Surgical Retina <input type="checkbox"/> Pterygium <input type="checkbox"/> Neuro- ophthalmology <input type="checkbox"/> Other									
<b>Relevant Ocular/Medical History:</b>							<b>Relevant Eye Drops and Medications:</b>		
<b>Previous Ophthalmic:</b> <input type="checkbox"/> Laser (PI/YAG/SLT/LASIK) <input type="checkbox"/> Trauma <input type="checkbox"/> Injection <input type="checkbox"/> Surgery									
<b>Driving:</b> Yes/No	<b>Visual Acuity</b>		<b>IOP</b> (mm Hg)	<b>Refraction</b>					
	Unaided	BC (glasses/ PH)		Sphere	Cyl	Axis	Prism	Base	Add
Right Eye:	6/	6/							
Left Eye:	6/	6/							
<b>Investigations:</b> (OCT/ VF/ Biometry/ FFA/ ERG/ Radiology/ Pathology/ Tomography/ Other)									

<b>Referring Practitioner:</b> <input type="checkbox"/> GP <input type="checkbox"/> Optometrist <input type="checkbox"/> Specialist			
<b>Name:</b>		<b>Provider No:</b>	
<b>Practice Address:</b>	Suburb/Town: Post code:		

Western NSW Local Health District is committed to integrated care. Please provide the details below of other health professionals involved in their care (for future clinical correspondence).

<b>General Practitioner:</b>	<b>Optometrist:</b>	<b>Ophthalmologist:</b>
Address:	Address:	Address:
Phone:	Phone:	Phone:

# Ophthalmology Referral Options

<b>Refer to Emergency Department</b>	<b>Refer to Outback Eye Service – Eye Clinic</b>		
Emergency Urgent cases need to be seen immediately	Category 1 Urgent next clinic	Category 2 < 3 months	Category 3 < 6 months
<ul style="list-style-type: none"> <li>- Acute angle closure glaucoma</li> <li>- Acute vision loss or signs of stroke</li> <li>- Central retinal artery occlusion</li> <li>- Chemical injury</li> <li>- Giant Cell Arteritis</li> <li>- Infectious keratitis (Hypopyon, fungal, Gonococcal/Chlamydia)</li> <li>- Intraocular foreign bodies</li> <li>- Malignant hypertension</li> <li>- Orbital cellulitis/acute dacryocystitis</li> <li>- Orbital fractures</li> <li>- Retinal detachment (macula on, if macula off can wait up to a week)</li> <li>- Superior retinal tear</li> <li>- Suspecting penetrating eye injury</li> <li>- Transient Ischemic Attack/Amaurosis fugax</li> </ul>	<ul style="list-style-type: none"> <li>- Acquired nystagmus</li> <li>- Acute visual field loss</li> <li>- Choroidal Melanoma or suspected retinal tumours</li> <li>- Corneal decompensation (Bullous Keratopathy, Endothelial Keratopathy)</li> <li>- Cranial nerve palsies</li> <li>- Diabetes with sudden vision loss</li> <li>- Ischemic ocular conditions</li> <li>- Macula hole</li> <li>- Macula oedema</li> <li>- Non-resolving Central Serous Chorioretinopathy</li> <li>- Optic neuritis</li> <li>- Papilledema</li> <li>- Post-op injection inflammation</li> <li>- Proliferative diabetic retinopathy</li> <li>- Proptosis with visual changes</li> <li>- Ptosis if pupil occluded</li> <li>- Recent onset pupil changes</li> <li>- Retinal tear (not superior)</li> <li>- Retinopathy of prematurity</li> <li>- Vitreous haemorrhage with retinal pathology (excluding Posterior Vitriol Detachment)</li> <li>- Wet Age Related Macular Degeneration</li> <li>- White pupil reflex in children</li> </ul>	<ul style="list-style-type: none"> <li>- Cataract with Best Corrected Visual Acuity (BCVA) &gt; 6/21</li> <li>- Epiretinal membrane with vitreoretinal traction VA &gt;6/12</li> <li>- Eyelid tumours</li> <li>- Glaucoma un-responsive to topical therapy</li> <li>- Recent onset retinal hole</li> <li>- Severe non-proliferative diabetic retinopathy without macula oedema</li> </ul>	<ul style="list-style-type: none"> <li>- Cataract with Best Corrected Visual Acuity (BCVA) &gt;6/12 &lt;6/21</li> <li>- Epiretinal membrane symptomatic</li> <li>- Eyelid problems: ectropion/entropion/ptosis</li> <li>- Proptosis without visual issues (Thyroid eye disease)</li> <li>- Pterygium encroaching pupil margin</li> <li>- Retinoschisis</li> <li>- Retinoschisis requiring treatment</li> <li>- Unresolving large chalazion</li> </ul>
<b>Refer to local Optometrist</b>			
Category 4			
<ul style="list-style-type: none"> <li>- Cataract with Best Corrected Visual Acuity BCVA &lt;6/12</li> <li>- Chemical injury follow up</li> <li>- Choroidal naevus</li> <li>- Congenital nystagmus</li> <li>- Conjunctivitis</li> <li>- Contact lens complications</li> <li>- Corneal and sub-tarsal foreign bodies</li> <li>- Corneal ulceration</li> <li>- Diabetes review, non-proliferative diabetic retinopathy (mild-mod)</li> </ul>	<ul style="list-style-type: none"> <li>- Drug toxicity screening ie. Plaquenil/tamoxifen</li> <li>- Dry Age Related Macular Degeneration</li> <li>- Elevated intraocular pressure &gt;30mmHg</li> <li>- Epiretinal membrane asymptomatic and no significant distortion</li> <li>- Eye discharge</li> <li>- Eye health screening</li> <li>- Eye pain</li> <li>- Eyelid lumps (stye, chalazion)</li> </ul>	<ul style="list-style-type: none"> <li>- Flashes, floaters</li> <li>- Fuchs dystrophy</li> <li>- Glaucoma suspect</li> <li>- Herpes simplex/ zoster infection</li> <li>- Hyphema</li> <li>- Keratoconus</li> <li>- Monitoring of long-standing retinal hole and retinoschisis</li> <li>- Non-infectious Keratitis</li> <li>- Post-op cataract inflammation</li> </ul>	<ul style="list-style-type: none"> <li>- Pterygium visually insignificant</li> <li>- Pupil changes with change in vision</li> <li>- Refractive error, presbyopia</li> <li>- Severe dry eyes, watery eyes, blepharitis</li> <li>- Strabismus, amblyopia</li> <li>- Sudden onset of blurred vision/ headaches/diplopia</li> <li>- Swollen eye</li> <li>- Trauma to eye/orbit, chemical burns</li> <li>- Uveitis</li> </ul>