

BATH RUH A&E Referrals

Emergency Patients

Weekdays

In working hours, please e-mail referrals to ruh-tr.EmergencyEyeClinic@nhs.net

If a casualty is more urgent, please phone the nurses on: **(01225) 824403**.

Out-of-hours Service

Phone RUH switchboard on **01225 428331** and ask for doctor on-call for ophthalmology:

Sundays: 08:30 – 15:30

Monday to Thursday: 08:00 – 20:00

Friday and Saturday: 24 hour cover.

Patients requiring emergency care after 16:00 on Sundays and after 20:00 Monday to Thursday will be seen by a senior doctor in the emergency department and referred to the Bristol Eye Hospital if necessary.

Contact details

Specialty Manager: Sandra Brereton Sandra.brereton1@nhs.net

Lead Clinician: Richard Antcliff Richard.Antcliff@nhs.net

Senior Nurse: Linda Ellis lindaellis3@nhs.net

Appointments: 01225 821821

Monday to Friday, 9.00am - 4.45pm

Urgent Advice: 01225 824403 (Triage Nurse)

Monday to Friday, 8.30am - 4.30pm

Urgent referrals: ruh-tr.EmergencyEyeClinic@nhs.net

All Other Enquiries: 01225 824602 (Eye Clinic Reception)

CUES – COVID Urgent Eyecare Service.

BSW CCG set up an Emergency Eyecare Service in May 2020 to reduce the number of patients that need to go to hospital. This is not MECS but Flashing Lights and Floaters, Acute Red Eye, Sudden onset Diplopia, field loss or reduction of vision can be seen under the scheme.

A list of registered practices can be found here

<https://primaryeyecare.co.uk/find-a-practice/>

Referral advice for wet ARMD

They may be suitable for anti-VEGF treatment. If an extensive sub-macula haemorrhage exists with an acute onset (<3 weeks) causing VA worse than 6/96, then the patient may benefit from a gas bubble & TPA injection to clear the haem followed by anti-VEGF treatment. If the history suggests a longer onset, still refer immediately but with guarded prognosis.

- Referral letter emailed same day to Urgent referrals:

ruh-tr.EmergencyEyeClinic@nhs.net

Orthoptics

If you wish to contact the orthoptic department, please call:

01225 824614

Please leave a message on our voicemail leaving name/ MRN (hospital number) and contact number and we will get back to you as soon as possible.

The Team

Sarah Israel - Head Orthoptist

Heather Edgar - Senior Specialist Orthoptist

Matthew Groogan - Specialist Orthoptist

Carole Vince - Senior Orthoptist

e-RS Clinics

Clinic & Location	NHS e-Referral Services	e-RS Clinic Types
Corneal • RUH, Bath	Corneal-Ophthalmology-RUH, Bath-RD1	• Cornea • External Eye Disease
Eyelid • RUH, Bath	Eye Lid-Ophthalmology-RUH, Bath-RD1	• Oculoplastics • Orbits • Lacrimal
General Ophthalmology Clinics run at the following hospitals: • Chippenham • Frome Community Hospital • Paulton Memorial • RUH, Bath • Shepton Mallet • Trowbridge • Malmesbury Primary Care Centre	General Ophthalmology-Ophthalmology-Chippenham-(RUH, Bath)-RD1 General Ophthalmology-Ophthalmology-Frome Community Hospital-(RUH, Bath)-RD1 General Ophthalmology-Ophthalmology-Shepton Mallet-(RUH, Bath)-RD1 General Ophthalmology-Ophthalmology-Trowbridge-(RUH, Bath)-RD1 General Ophthalmology-Ophthalmology-RUH, Bath-RD1 General Ophthalmology-Ophthalmology-Paulton-(RUH, Bath)-RD1	General Ophthalmology at any location can be found using the following clinic types: • Not otherwise specified • Cataract • Neuro-Ophthalmology • Neuro-Ophthalmology • Not Otherwise Specified • Cataract • Not Otherwise Specified • Neuro-Ophthalmology • Glaucoma • Other Medical Retina
Glaucoma • RUH, Bath	Glaucoma-Ophthalmology-RUH-Bath-RD1	• Glaucoma
Medical Retinal • RUH, Bath	Medical Retinal-Ophthalmology-RUH, Bath-RD1	• Diabetic Medical Retina • Vitreoretinal • Other Medical Retina
Minor Operations	Minor Operations Eye Lid-Ophthalmology-RUH,	• Info • Oculoplastics

Eye Lid <ul style="list-style-type: none"> RUH, Bath 	Bath-RD1	<ul style="list-style-type: none"> Orbits Lacrimal
One Stop Cataract <ul style="list-style-type: none"> RUH, Bath 	One Stop Cataract-Ophthalmology-RUH, Bath-RD1	<ul style="list-style-type: none"> Cataract
Orthoptics Clinics run at the following hospitals: <ul style="list-style-type: none"> Chippenham Frome Community Hospital RUH, Bath Trowbridge 	Orthoptics-Ophthalmology-Chippenham-(RUH, Bath)-RD1	General Ophthalmology at any location can be found using the following clinic types: <ul style="list-style-type: none"> Squint Ocular Motility (Adult) Orthoptics
	Orthoptics-Ophthalmology-Frome Community Hospital-(RUH, Bath)-RD1	
	Orthoptics-Ophthalmology-Trowbridge-(RUH, Bath)-RD1	
	Orthoptics-Ophthalmology-RUH, Bath-RD1	
Two Stop Cataract <ul style="list-style-type: none"> RUH, Bath 	Two Stop Cataract-Ophthalmology-RUH, Bath-RD1	<ul style="list-style-type: none"> Cataract
YAG Laser <ul style="list-style-type: none"> RUH, Bath 	YAG Laser-Ophthalmology-RUH, Bath-RD1	<ul style="list-style-type: none"> Laser (YAG Capsulotomy)

Non e-RS Clinics

Clinic Name	Location	Led by
Ophthalmology	<ul style="list-style-type: none"> RUH, Bath Trowbridge 	Optician
Orthoptist	<ul style="list-style-type: none"> Chippenham RUH, Bath 	Orthoptist

DIABETIC RETINOPATHY SCREENING

Eye screening is a key part of diabetes care to check for diabetic retinopathy, a condition that can lead to sight loss if it's not detected early and treated. Everyone aged 12 and over with diabetes receives an invitation to this service once a year.

BaNES, Swindon & Wiltshire (BSW) Diabetic Eye Screening Programme

BaNES, Swindon & Wiltshire (BSW) Diabetic Eye Screening Programme Service provided by Emiscare.

Contact Details for Professionals

Telephone: 01225 582300 or 0333 666 1233

Email: miul.administration@nhs.net

<https://npscure.northgateps.com/patients/diabetic-eye-screening/banes-swindon-wiltshire/>
NPS Care Administration, 1 Kings Court Business Park, Charles Hastings Way, Worcester WR5 1JR.

As indicated in the College of Optometrists Guidelines, it is unprofessional to seek to dissuade a patient from attending a local NHS diabetic retinopathy screening service. These services provide second and tertiary grading, formal results reporting, robust recall and monitoring processes including for those patients referred into secondary care and are subject to stringent quality assurance measures. However, where a patient has made it clear that they have no intention of attending the NHS service, it would then be appropriate to offer them a dilated retinal examination, either as part of a sight test or as an additional separate service. You should not, however, suggest that such a service is an alternative to an accredited NHS screening service conforming to National Screening Committee standards.

For further advice and for advice on 'private' screening please look at the websites of the AOP and College of Optometrists.

More information can be found on these websites:

www.diabeticeye.screening.nhs.uk

If an optometrist detects diabetic retinopathy during an eye examination then they still need to consider whether the patient needs referral for ophthalmological opinion in line with the College of Optometrists framework for optometric referrals via the normal GOS route.

Overview of National Screening Grading Protocol for Digital Screening

NB to be read in conjunction with <http://diabeticeye.screening.nhs.uk/pathway>

R0: No retinopathy Absence of any features of DR

Management: Annual screening recall

R1: Background Microaneurysms or retinal haemorrhages Venous loops

Exudate in the presence of other non-referable features of DR

Any number of cotton wool spots in the presence of other non-referable features of DR

Management: Annual screening recall

R2: pre-proliferative Venous beading

Venous reduplication

Multiple blot haemorrhages (see website for guidance)

IRMA

Management: Routine referral to Medical Retina

R3a: Active Proliferative New vessels on the disc

New vessels elsewhere

Pre-retinal or vitreous haemorrhage

Management: Urgent Referral to medical retina

R3s: Stable Proliferative retinopathy Evidence of peripheral laser treatment AND AND

Stable retina from photographs taken at or s shortly after formal discharge from HES

Management: to be decided on case by case basis

M0: No maculopathy Absence of any M1 features

Management: Annual screening recall

M1: Maculopathy Exudates within 1 DD of fovea

Group of Exudates within the Macula (see website for guidance)

Retinal thickening within 1 DD of fovea if stereo available

Any microaneurysm or haem within 1 DD of fovea with a best VA of $\leq 6/12$ (if no stereo available)

Management: to be decided on case by case basis

P: Photocoagulation focal/grid to macula or peripheral scatter

(NB no grade assigned in the absence of laser scars)

U: unclassifiable Image set inadequate for grading

Management: Referral to slit lamp screening clinic unless referable retinopathy present

GLAUCOMA

Glaucoma Referral

. Patients should be referred if there are repeatable Goldmann Applanation readings between 24 & 31mmHg or a **repeatable** field defect. Any suspicious disc appearance should be referred in the normal way.

When referring a patient with suspected ocular hypertension or suspected glaucoma please mention this within the referral correspondence as this helps the GP and hospitals to feed the patient into the correct clinic.

Cataract Referrals

Currently these are made via the GP or through the referral service at Bswccg.rsseyes@nhs.net

LOW VISION SERVICES

Royal United Hospital Low Vision Clinic

Optometry Department

Tel: 01225 824609

Provides low vision assessments, prescriptions for optical appliances (if not already provided by community optometrists) and loan LVAs. Optometrists can make referrals via GPs. If a community optometrist has conducted a sight test, a letter containing any appropriate clinical details would be helpful.

RNIB Bristol

10 Stillhouse Lane, Bedminster, Bristol BS3 4EB

Tel: 0117 953 7750 Fax: 0117 953 7751 www.rnib.org.uk Email: rnibbristol@rnib.org.uk

Hours: Monday-Thursday 9.00am -4.30pm. Friday 9.00 am- 4.00pm.

Rehabilitation Officer (by appointment) 10.30am -12.30pm Mon- Thurs.

Services: General information, support and advocacy, emotional support and counselling, leisure activities, rehabilitation support for mobility, communication and daily living, support services to people who are deafblind and assistance with accessing employment and lifelong learning. Learndirect courses and UK online Centre. There is a Resource Centre for a range of equipment and free publications available.

Anyone is welcome to drop in and browse. Referrals to Rehabilitation Officers can be made by patients, relatives, GPs etc. Please note - RNIB Bristol does not offer an LVA service. The building is shared with RNID and Guide Dogs for the Blind.

visionPlus

Deaf/Blind VI Service

visionPLUS offer similar services to deafPLUS except that the service is tailored to the needs of people facing sight loss.

Bath is contracted through Virgin Care to provide our service (Virgin Care provide Health and Social Care in Bath and North East Somerset).

We offer a range of services and our service provided is tailored to our individual client. Some of the services we provide are:

- Information about living with sight loss, eye conditions and sight loss.
- General Advice with regards to coping with sight loss
- Advocacy: support with difficult issues
- Benefits Advice: including form filling, attendance at medical assessments, dealing with reconsiderations and appeals and attendance at Tribunals
- Equipment: including funded or partly funded equipment such as mobility canes, lighting talking clocks etc.

visionPlus sign post to relevant health services and social/rehabilitation services.

deafPLUS

No 2 Queens Parade

Bath BA1 2NJ

Tel/Text: 01225 446 555

Email: bath.office@deafplus.org

Opening hours

Weekdays – 10.00am – 1.00pm

BATH RUH CONSULTANTS

Consultant Special

Interest

Telephone

RUH

Private Clinic

Mr Jonathan Boulton

Oculoplastics

RUH - Marijane Inches 01225 824533 marijaneinches@nhs.net

(Lead Secretary/Ophthalmology Services Co-ordinator)

Circle Bath: 01761 422287

Mr Jonathan Luck www.jonathanluck.com

Cornea

RUH - Cornea Salvina Coccia 01225 824767 salvinacoccia@nhs.net

Circle Bath - Nicky Crump: 01761 422265 nicky.crump@circlebath.co.uk

Mr Richard J Antcliff www.richardantcliff.com

Medical Retina

RUH - Jacky Dennis 01225 821704 jacky.dennis@nhs.net

Circle Bath - Helen Barnes 01761 422264 Helen.barnes@circlebath.co.uk

Mr Roger Baer rogerbaer.co.uk

Glaucoma

RUH - Stacey Watts 01225 824534 Stacey.watts@nhs.net

Circle Bath - John Starkey 01761 422287 john.starkey@circlebath.co.uk

Mrs Misha Badial

Medical Retina

RUH Victoria Moore/Katie 01225 824878

victoriamoore1@nhs.net / Katie.burridge@nhs.net

Circle Bath 01761 422222

Miss Freia McGregor

Medical Retina

RUH Caroline Randall 01225 824479 c.randall2@nhs.net

BMI Bath Clinic 01225 835555

Claverton Down Road

Combe Down

Bath

BA2 7BR

Mr Javad Moayedi

Mr Thamir Yassen

Miss Guzaliya Safiullina

Bristol Eye Hospital Contacts

Bristol Eye Hospital

Lower Maudlin Street

Bristol BS1 2LX

Same day referral to Bristol Eye Hospital:

- E-mail referral via ubh-tr.amdbeh@nhs.net Only email from a secure email address (e.g. @NHS.net)

Please attach OCT image if possible

- Fax Referral to Medical Retina Secretaries at 0117 342 3402

Please refer to Remedy for full details

<https://remedy.bnssgccg.nhs.uk/media/3861/ophthalmology-primary-care-advice-final-12.pdf>

OTHER HOSPITALS

Southmead Hospital

Monks Park Road

Bristol BS10 5NB

0117 950 5050

Minor Illness and Injury Unit (MIU) deals with minor eye problems.

0117 323 5100

9.00 am – 8.00 pm every day including Bank Holidays

Bristol Royal Infirmary

Upper Maudlin Street

Bristol BS2 8HW

0117 923 0000

A&E Department deals with eye problems when BEH is closed.

0117 342 2710

Weston General Hospital

Grange Road, Uphill

Weston-super-Mare BS23 4TQ

01934 636 363

South Bristol NHS Community Hospital

Hengrove Promenade

Bristol BS14 ODE

Minor Illness and Injury Unit (MIU) deals with minor eye problems.

0117 342 9692

8am – 8 pm every day including Bank Holidays

Yate West Gate Centre and Minor Injuries Unit (MIU)

21 West Walk

Yate Town Shopping Centre

Bristol BS37 4AX

Deals with minor eye problems

01454 315 355

Monday- Friday 8.30am – 7.30 pm Saturday and Sunday 10am – 2.00pm. Including Bank Holidays

Broadmead Medical Centre: Walk-in Centre

59 Broadmead. Bristol BS1 3EA

0117 954 9828

Can prescribe antibiotic treatment for conjunctivitis but does not deal with any other eye conditions.

Mon-Sat 8am – 8pm. Sundays and Bank Holidays 11am – 5 pm

UKSH South West Ltd: Emersons Green NHS Treatment Centre

The Brooms

Emersons Green

Bristol BS16 7FH

0117 906 1801

enquiries@uk-sh.co.uk

CircleBath Hospital

Foxcote Avenue

Peasedown St John

Bath BA2 8SQ

T 01761 422 222

F 01761 422 223

enquiries@circlebath.co.uk

Private and NHS cataract referrals

General Referral Advice and Information

General Referrals to GPs

Referrals are made through the GP unless they are an emergency. Referral letters, which are sent to the patient's GP are very often copied then forwarded with a covering letter to the Ophthalmology Department at the Hospital Eye Service. Typed letters are more legible after several copies.

The following information will enable the GP and the hospital to process the referral efficiently;

- Full patient's details including full name, address, post code and phone number.
- Full optometrist's details including name of referring optometrist (this is more likely to result in a reply), and date of consultation/referral.
- Signs, symptoms, how long symptoms have been present, previous ocular history, suspected diagnosis,
- VAs including monocular near VAs and previous VAs if possible, and results of supplementary tests such as visual fields where appropriate.
- A clear indication to the GP as to whether it is a report requiring no further action, or a referral.
- If it is a referral, what action is required by the GP and the patient? E.g. 'The patient has been asked to contact you soon.'
- It is good practice to state if the referral is emergency (to A & E), urgent, or routine.
- The GP should be notified if a patient has been directly referred.
- If malignant changes are suspected mark the referral clearly so the patient can be prioritised.

- If a retinal detachment is a possibility the patient should be warned about the potential consequences of not attending A & E.
- You are now required to give written information about the referral to the patient if they require it. This can be a copy of the referral letter.

Avon LOC Referral letter Guidelines (June 2011)

Hospital eye departments are now increasingly using triage of referral communications to direct patients into the correct clinic type and with the appropriate level of urgency. Therefore it is important that all referral communications contain as much information as possible.

These should include:

- a) Practice name and address (including telephone + fax number and e-mail address if available)
- b) Patient name and address (including home and work telephone numbers if possible)
- c) Patient GPs name address
- d) One sentence summary of reason for referral (e.g. 'Reduced right vision due to cataract.' or 'High IOP –outside NICE guidelines.')
- e) Further in depth summary of symptoms/history including any signs and test results.
- f) Patients prescription (if possible with pinhole acuities if reduced VA and near acuities with a +4.00 add if referring for low vision)
- g) Advice to patients GP on which clinic to refer into and urgency of referral.

Example Outline of Private Referral Letter

GPs name

GPs Address

Date

Dear 'GPs name'

Ref. Patient Name, Date of Birth, Address (inc Postcode), Work Tel No, Home Tel No.

Reason for referral: (one line triage summary)

Symptoms/History:

Clinical Details of eye exam (e.g. Pupil responses, Adnexa, Retina etc)

IOP: R. mmHg; L. mmHg (instrument, time).

Field Results (if appropriate)

Refraction Results

	Vis	Sph	Cyl	Axis	D Prism	VA	PH	Add	N Prism	NVA
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Advice: including where to refer and urgency of referral.

Yours sincerely

Optom