

Paediatric Ophthalmology Emergency Triage Guidance



Version 1.0 Last updated March 2022. This guidance will be updated occasionally. The latest copy is at https://alderhey.nhs.uk/services/ophthalmology/triage

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This triage guidance is for Emergency Department (ED) doctors and Community Optometrists

- All RED conditions should be referred to ED on the same day and ED can contact ophthalmology to discuss (see Contact Details below).
- All YELLOW conditions (whether seen by ED or Optometrist) can be discussed with ophthalmology (see Contact Details below) for an eye clinic appointment within 24-72 hours. If out of hours, please contact Oncall Ophthalmologist to discuss.
- All GREEN conditions can be seen by an optometrist first and do not require ED. If an optometrist wishes to have a second opinion, please refer via a letter.

	Emergency (same day) - with phone call	Urgent (24-72 hours) - with phone call	Optometrist assessment first – if 2 nd opinion needed, refer via letter
Anterior	 Chemical injury (use topical anaesthetic then irrigate with NaCl 0.9% or cold tap water until pH 7) Suspected open globe injury Embedded foreign body Orbital cellulitis Eyelid laceration Post operative cataract (within 30 days) with symptoms of decreased vision/ red or painful eye Acute proptosis 	 Painful eye (keeping patient awake) Scleritis Corneal ulcer Hyphema Blunt trauma Herpetic infections (simplex/zoster/shingles with visual disturbance and eye symptoms). Corneal epithelial defect Preseptal/suspected orbital cellulitis Burns involving the face Acute dacryocystitis 	 Nasolacrimal duct obstruction Conjunctivitis (consider GP/Pharmacy) Episcleritis Keratoconus Chronic proptosis/exophthalmos Recurrent corneal erosion Corneal dystrophy Cysts/Chalazia (can be treated with warm compresses and lid hygiene) White reflex in a child
Posterior		Retinal tears Retinal detachment Optic neuritis Retinal mass Vitreous haemorrhage Retinal haemorrhage	 Naevus (close to disc or macula, presence of lipofuscin, subretinal fluid) Retinitis Pigmentosa/dystrophy Retinal pigmentation/macular changes
Visual Loss			 Non-specific blurry vision * Bilateral transient loss of vision * Gradual loss of vision * *If optometrist unclear about cause
Other	Acute ophthalmoplegiaAcute ptosisSuspected nerve palsy	New pupillary defects New nystagmus Acute diplopia	

Paediatric "Swollen disc" Triage guidance

	Swollen Disc ?Papilloedema	Action to Take
1	Routine incidental finding, good visual function (acuity, colour vision, visual fields to confrontation) and asymptomatic	Routine ophthalmology letter referral
2	Routine incidental finding, good visual function but with non-specific symptoms	Routine ophthalmology letter referral (but can call to discuss)
3	Symptomatic (headache, worse on laying flat/bending over, visual obscurations, pulsatile tinnitus, focal neurological symptoms) with obvious disc swelling +- disc haemorrhages	Same day hospital referral (call eye Clinic/on-call)

Contact Details

- 9am to 5pm: Alder Hey Eye department contact number: 0151 252 5215 & referral address: Ophthalmology Eye Clinic department, Alder Hey Children's NHS Foundation Trust, Eaton Road, Liverpool, L122AP. Note: FAX is no longer encouraged
- Outside clinic hours: Call Alder Hey switchboard on 01512284811 and ask for ophthalmology registrar on-call
- For optometrists: after the phone call you may be asked to send us further information via the email refertoalderhey@nhs.net
- For ED doctors: after the phone call you may be asked to send us further information via the email eye.handover@alderhey.nhs.uk
- For adult patients (17 years and above) contact/refer to St Paul's Eye Hospital located in: Royal Liverpool University Hospital, Prescott St, Liverpool L78XP. Telephone: 01517062000
- ED Triage Telephone number to contact is 01512283196 or 01512283709