

Triage Guidance for Emergency Care

	EMERGENCY (SAME DAY)	URGENT	PRIORITY	ROUTINE
ANTERIOR	<p>RED EYE (NON-TRAUMATIC)</p> <ul style="list-style-type: none"> Acute angle closure glaucoma, (headaches, painful eye and Nausea) IOP >40mmhg Painful and/or infection post op: - Hypopyon, pain, profuse bleeding, corneal graft rejection <p>RED EYE (TRAUMATIC)</p> <ul style="list-style-type: none"> Blunt Trauma Chemical/acid/alkali burns (irrigate asap until PH 7) Corneal Ulcers Hyphaema Infective Keratitis Lid/Lacrimal Laceration Penetrating injuries Uveitis 	<ul style="list-style-type: none"> ASYMPTOMATIC high IOP >34mmhg BELLS Palsy WITH CORNEAL INVOLVEMENT CORNEAL HERPETIC INFECTIONS EMBEDDED FOREIGN BODY PAINFUL EYE SCLERITIS SHINGLES <p>With visual disturbance & eye symptoms</p>	<ul style="list-style-type: none"> CHRONIC PROPTOSIS/ EXOPHTHALMOS (plastics clinic within 1/52) CONJUNCTIVITIS (with no improvement on treatment within 2/52) RECURRENT CORNEAL EROSION Dense cataract (unable to assess retina) 	<ul style="list-style-type: none"> BELLS Palsy (with no eye involvement, advise lubricants and tape at night) Chalazion /stye CONJUNCTIVITIS (send to red eye or GP) ENTROPION or ECTROPION EPISCLERITIS LONG STANDING DRY EYE PTERYGIUM SUB CONJUNCTIVAL HAEMMORRHAGE (check BP, community red eye clinic)
VISUAL LOSS	<p>TEMPORAL ARTERITIS visual loss, headache, tender scalp</p> <p>No visual loss or disturbances, to see GP for ESR and CRP, refer to GCA guidelines</p>	Suspected optic neuritis with symptoms		<ul style="list-style-type: none"> BILATERAL TRANSIENT LOSS OF VISION GRADUAL LOSS OF VISION (optician)
POSTERIOR	<ul style="list-style-type: none"> Non diabetic vitreous hemorrhage PAPILLOEDEMA (with headaches and visual symptoms) RETINAL DETACHMENT RETINAL TEARS 		<ul style="list-style-type: none"> CRVO/BRVO DIABETIC SYMPTOMS (refer to diabetic team) Retinal holes with symptoms Suspicious iris or retinal lesions (close to disc, suspicious, or lipofuscin, [orange coloring]) WET AMD 	<ul style="list-style-type: none"> Asymptomatic indistinct discs FLASHING LIGHTS AND FLOATERS (no other symptoms) send to community optometrist MACULAR HOLE, and EPIRETINAL MEMBRANE
PAEDS	<p>CELLULITIS (feeling unwell, pyrexial, swollen lids, double vision, pain on eye movement)</p> <p>TRY AND SEE ALL CHILDREN SAME DAY</p>	STICKY EYES		
OTHER	<ul style="list-style-type: none"> ADULT CELLULITIS (as above) ACUTE ONSET: - diplopia/squint/nerve palsy/ptosis Sudden ptosis with double vision 	NEW PUPILLARY DEFECTS		<ul style="list-style-type: none"> SUSPECT GLAUCOMA/ABNORMAL DISCS (New multi glaucoma clinic)