**Fast Track AMD – Retinal Service Referral form**

**Royal Free London NHS Foundation Trust**

**This form is the Fast track AMD treatment pathway. Please ensure you have completed the following information on your referral:**

|  |  |
| --- | --- |
| Date of referral:  | **Referral Source:**Referring Optometrist name:Practise address |
| Patient name & Address: DOB:Contact No.NHS number:  |
| GP details:(Name & address) |

**Reason for Urgent referral (at least one sign)**

 Sub retinal fluid Yes/No Macular Haemorrhage Yes/No

Macular Oedema Yes/No Wet AMD Proliferative Yes/No

Other: Yes/No -------------------------------------

**Referrers’ declaration**

|  |
| --- |
| □ I certify that this patient satisfies the above referral criteria for Urgent assessment. I have advise the patient to call the Urgent Eye care at Royal Free hospital in case the HES referral fails to issue fast track appointment within 7 days or to get in touch with their referring practitioner for more advice. |
| Referrers signature: |
| □ Consent: I give consent for my optometrist to send this via their normal practise email. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Assessment**

Date ……………………………………….if not the same as above

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| REFRACTION | Sphere | Cyl | Axis | VA |  | Sphere | Cyl | Axis | **VA** |  |
| ***RIGHT*** |  |  |  |  | Distance |  |  |  |  | *LEFT* |
|  |  |  |  |  | Near |  |  |  |  |  |

Previous VA’s : R) L)

IOP R) mmHg L) mmHg

Please state type of tonometry ………………………………..

Comments :

**PLEASE EMAIL THIS FORM TO: rf-tr.amdurgentreferral@nhs.net**

**Next steps**

* Please give patient the RFL Fast track retinal service leaflet.
* The referring optometrist will be the first safety net i.e. the patients will be advised to come back to referrer if they have not heard from trust within a week

Please make this clear to the patient to contact you if they have not heard from the hospital within in one week of the referral. Please then contact us with the details above.

* You will receive a copy of the outcome letter after the diagnostics have been undertaken.