GOS18 Ophthalmic Referral/Information for GP

Signed (optometrist/OMP)

Please use black ink to fill in this form

Date of	sight tes	st		te of r	f referral (if different)							
Optometrist/OMP Name and Practice Address								Patient details				
								Title G				Gender M / F
								Surname				
Post Code: Tel:								Forenames				
NHS mail:								Address				
GP Name and Practice Address												
								Post Code:				
								Telephone:				
								Date of Birth				
								NHS Number (if known)				
								(16 or older): Clinic Type CLINICAL TERM(S):				
below)	20.011/											nter relevant keyword(s) hese are to help the GP
							Cornea	to fin				find correct HES service)
Patient sent to Eve Casualty								etic Medical Retina				
Advise Referrel to Eve Dept (URGENT)							Externa Glaucor	rnal Eye Disease				
								r (YAG capsulotomy)				
Low							_ow Vis					
							-	astics / Orbi			_	
日								r Medical Retina (incl ARMD) nt / Ocular motility				
Paediatric non-strabismus							/itreore	eoretinal				
☐ Orthoptic (only) ☐ No							Not Oth	erwise Spec	cified	1		1
	Sph	Cyl	Axis	Prism	Base	9	VA	Pinhole	Add	Near Visior		Previous corrected VA on (date)
Right												
Left												
			' 	Right eye				Left eye				
Visual fi			Norma	Normal/enclosed (if abnormal)				Normal/enclosed (if abnormal)				
Optic ne	erve heads			C:D				C:D				
Intraocular pressure Time				mm				0.2	pplanation/non contact/			
	nal informat	ion		Cy								d fundus examination
GOS 18 Part One – This part must accompany any referral made to an Eye Department												
STATEMENT: The reason for this referral has been explained to the patient or guardian who agrees to it. The patient or guardian also consents												
to informa	ation being e		between the									t or ophthalmic medical
-		n's name and										

GOC/GMC No

10-12-01 NHSBSA 035442

Optometrist Guidance

Most referrals to the HES are via "Choose and Book" (CaB). This system provides two ways for a GP surgery to find an appointment in the correct service (e.g. clinic). Please note that the person doing this booking may *not* be a doctor.

- 1. Via a "Clinic Type".
 - a. These Clinic Types are fixed and are the same throughout England.
 - b. When a Clinic Type is entered all the services linked to it are displayed. For a simple one (such as Cataract) this will show all the clinics seeing cataracts and nothing else.
 - c. Other Clinic Types may result in a range of different clinics being offered. However these clinics may only see a subset of the conditions covered by the Clinic Type. For instance Oculoplastic / Orbit / Lacrimal may link to a nurse led cyst service, a lid malposition (entropion etc) service or a service exclusively for lacrimal problems.
 - d. So if a range of different types of clinic are offered the surgery will need to select the correct one. They can do so on the basis of a "Clinic Term" you have entered (see below) and/or the additional information you put on the free text part of the form.

2. Via a Clinical Term.

- a. If a clinical term (such as "Entropion") is entered in the search field in CaB then this will show all the services which see patients with this problem or diagnosis.
- b. This is particularly useful for conditions that the GP may not recognise, such as "Keratoconus" or "Macular Dystrophy"

Please indicate only one "Clinic Type". However you may offer more than one Clinical Term. Please try to provide both a Clinic Type and Clinical Term for all patients.