

CONFIDENTIAL

Flashes and Floaters Direct Triage Referral Patient Information Sheet

Following your intial questionning your symptoms indicate urgent referral to the Acute Referral Clinic at Gloucestershire Royal Hospital NHS Fondation Trust. Staff will expect you at the time you were told.

Referral Source:

Patient's Name	Surname
Patient's Date of Birth	
Patient's GP	
Patient's Address	
Patient's Telephone Number (<u>PLEASE</u> NOTE CLEARLY)	
Referral type	Eye casualty- pre-aaranged via the triage

Clincial Notes

This patient was **not** referred to the PEG Flashes and Floater Service because the following symptoms/findings indicate a higher risk of retinal tear/detachment;

Flashes and/or Floaters WITH

PLEASE TICK

- O Rapid vision loss
- O Curtain across vision + vision loss
- O Functional Monocular i.e. VA of less than 6/60 in other eye
- O History of Retinal detachment/Tear in fellow eye
- O Field loss
- O High Myopia (>5D)