

## **NCL Clinical Protocol Quick Reference Guides**

Please note that these guides/prompts do not replace the clinical protocols & record templates

Please undertake all visits using the EOS App: <a href="https://eos.evonnect.com">https://eos.evonnect.com</a>

#### **Cataract Pre-Op Assessment**

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History and Symptoms	Medical history, ocular history, smoking status, impact on quality of life
Initial Tests	V/A, pupils, Amsler (where required), IOP
Anterior Segment	Slit lamp examination (lids, lashes, conjunctiva, sclera, cornea, iris, lens. Type of cataract
	and density
	Pseudoexfoliation, corneal endothelial dystrophy, can't lie flat?
Posterior Segment	SL-BIO (dilation only where clinically indicated) – vitreous, retina, macula, disc, choroid
Discussion	Does cataract account for visual symptoms and is there an impact on lifestyle? Does
	patient want surgery? Aware of benefits and risks. Provide patient with cataract leaflet.
Outcomes	<u>Discharge</u> if patient does not meet criteria/does not want surgery. <u>Refer</u> if patient meets
	criteria and wants surgery

## **Cataract Post-Op Assessment**

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History and Symptoms	Which eye was treated and where. Symptoms. Record refractive target and expected V/A	
	(if available)	
Initial Tests	Monocular V/A (distance/near) with refraction, Amsler (where indicated). IOP	
Anterior Segment	Slit lamp examination (lids, lashes, conjunctiva, sclera, cornea, iris, lens). Abnormal wound healing? Reduced corneal clarity? A/C cells? Posterior synechiae? PCO? Vitreous activity?	
<b>Posterior Segment</b>	SL-BIO (dilation only where clinically indicated) – vitreous, retina, macula, disc, choroid	
Discussion	Summarise findings. Is spectacle update required? Satisfied or dissatisfied?	
Outcomes	Satisfactory post-op report	
	Complications require a new referral to the HES where patient had surgery	

#### **Glaucoma Repeat Readings**

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<b>History and Symptoms</b>	Symptoms (e.g. visual field loss). Risk factors (e.g. demographics, family history)
Initial Tests	V/A (distance/near). Visual fields (full/supra threshold test). Pupil reactions
Anterior Segment	Slit lamp examination (cornea, iris, lens). Anterior chamber examination (e.g. Van
	Herrick). IOP check (GAT or Perkins)
Outcomes	Discharge if no abnormalities. Follow-up if required. Refer on if clinically appropriate
	(e.g. IOP >23mmHg, confirmed visual field defect etc.)

# **Suspect AMD/DMO Assessment**

<b>History and Symptoms</b>	History and symptoms - medical history, ocular history, social history
Initial Tests	V/A (distance/near) with refraction (where indicated). Amsler and pupil reactions
	(where indicated)
<b>Posterior Segment</b>	SL-BIO (dilation where indicated) - lens, vitreous, disc, macula, retina, choroid
Imaging	Colour fundus photographs (disc, macula and lesion(s)). OCT imaging.
Outcomes	Refer to HES for image/OCT review







