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**Staffordshire and Stoke-on-Trent - Cataract and Glaucoma Services**

**The Integrated Cataract Service**

This is a full wrap-around service for patients. It includes an Enhanced Cataract Referral (also known as a Pre-Op Assessment) and the Cataract Post-Operative Assessment.

**Enhanced Cataract Referral Service**

A routine NHS or private sight test will reveal the presence of a referrable cataract and should be directed to the Enhanced Cataract Referral Service. During the Enhanced Cataract Referral Assessment, the examining practitioner will discuss the cataract with the patient. If the cataract is not presenting any significant visual or lifestyle difficulties, then they will continue to be reviewed by the optometrist in the normal way.

If the cataract is presenting significant visual difficulties and other causes of a drop in vision have been excluded, the practitioner will discuss with the patient whether they wish to have cataract surgery (this will include relative risks and benefits of cataract extraction) and offer the patient a choice of suitable hospitals to have their surgery. If the patient wishes to proceed the practitioner will provide a self-assessment health questionnaire, which will help to establish suitability for surgery by highlighting other health problems and possible contra-indications.

**The Glaucoma Referral Filtering Service**

The Glaucoma Referral Filtering service consists of the Glaucoma Repeat Measures (GRM) and the Glaucoma Enhanced Case Finding (ECF) service.  
   
**The Glaucoma Repeat Measures (GRM)** service is for patients with raised IOPs and/or suspect visual fields with no other signs of glaucoma. Patients can be seen by their own practice immediately following a sight test, or at another participating practice for repeat readings, to confirm findings before referral to secondary care. The aim of the service is to use the skills of accredited primary care optometrists to repeat diagnostic tests to confirm the risk of disease and thus improve the accuracy of referrals and deflect unnecessary referrals.

A patient is eligible for this service if they have any of the below findings at the sight test, but no other signs of glaucoma noted (e.g. no concerning optic nerve features):

* High IOP (24-31mmHg)
* Abnormal visual field defect (where no urgent pathology ocular or general health is the suspected cause)
* High IOP and an abnormal visual field defect (where no urgent pathology ocular or general health is the suspected cause of visual field defect)

**NOTE: Where a practice does not provide GRM, any non-emergency glaucoma/OHT suspect patients should be referred for a Glaucoma Enhanced Case Finding (ECF) assessment rather than GRM to a participating practice.**

**The Glaucoma Enhanced Case Finding (ECF)** service is for patients with multiple suspicious clinical signs and/or risk factors of glaucoma. The aim of the Glaucoma Referral Filtering pathway is to reduce false positive referrals to the hospital eye service, reducing patient anxiety and increasing capacity within the overburdened hospital glaucoma clinics.

A patient is eligible for this service if they have any of the below findings at the sight test:

* Suspicious discs or disc asymmetry and IOP <24mmHg (GAT)
* Narrow/Occludable angles
* Any PDS/Pseudoexfoliation with IOP <21mmHg
* IOP 24-31mmHg and/or a visual field defect suspicious of glaucoma from a non-participating practice of the Glaucoma Repeat Measures (GRM) service

 

