

# Triage Rules for Pediatric Eye and Adult Strabismus Clinics

## Urgent Outpatient Add-On

**Definition:**

- Patient needs to be seen the same or next day but is not in the hospital
- Patient issue needs to be addressed the same or next day

**Triage Procedure:** Page 4545

**Resident/Fellow Procedure:**

- Request the patient be added on to the “Helm” clinic or other appropriate clinic
- Questions can be referred to “Helm” clinic faculty
- If no resident/fellow pager held by the “Helm” faculty or designee

## Inpatient / ED consults

**Definition:** Patient needs to be seen the same day and is in the ED or hospital

**Triage Procedure:** Page 4545 unless the issue is related to Retinopathy of Prematurity “ROP” then call Vikki Bell 356-0382

**Resident/ Fellow Procedure:** Discuss with “Helm” faculty about adding on to clinic or seeing on the floor.

## Non-Urgent established patient questions/issues

**Definition:** Patient issues that are non-urgent (e.g. glasses/prescription requests, follow-up questions)

**Triage Procedure:**

- Send Epic message to the responsible faculty/staff.
  1. “Patient call” when the patient used the telephone to contact us.
  2. “Pt. Advice Request” when the patient used electronic messaging.
- Don’t use “Staff Message” for messages that require follow-up with patients.
- Patients are often seen by staff orthoptists. If the issue is related to glasses, prism, not-new diplopia, patching, atropine eyedrops, or orthoptic clinic scheduling and were seen by one of our orthoptists. These questions can be sent to the appropriate orthoptist.
- If the patient needs to schedule an appointment: See Urgency of Pediatric Eye conditions below before referring to the PAC or Eye department scheduling so you can communicate the level of urgency.

**Resident/Fellow Procedure:**

- Link your Epic Inbox to the Peds Faculty inbox at the beginning of your rotation and unlink at the end of the rotation.
- Check the messages each day and try to address the issue. Communicate with the responsible faculty if there are questions.

## Non-Urgent new referrals or non-established patients

**Definition:** Patient is new to the peds service and has a question or the patient is being referred and there is a question about when/with whom to schedule. This also includes patients seen on call by a non-peds ophthalmologist.

**Triage Procedure:** E-mail the Triage Attending with questions (see attached schedule)

## Urgency of Eye Conditions

### Same Day Emergent Referrals (page 4545)

#### Trauma:

- Penetrating/perforating
- Metal on metal
- Severe blunt trauma
- Mild blunt trauma with ocular symptoms

If the patient has multiple injuries or is not being referred by a physician, they should report to the nearest Emergency Room

### Schedule within 24 hours (page 4545)

#### Red Swollen Eye

Blood IN eye associated with vision symptoms

Chemical burn or cleaner splashed in eye - If the patient has multiple injuries or is not being referred, they should report to the nearest Emergency Room, chemical burns need copious irrigation with water immediately.

Postoperative patient with increased redness, pain or swelling

Sudden loss of vision

### Schedule within 2-4 days

White pupil

Absent red reflex

Red eye

Eye pain with tearing, and/or photophobia, eye surface swelling, lid swelling

Headache associated with pain and double vision

Cloudy cornea

#### Schedule within 2 Weeks

- Sudden onset of strabismus or diplopia in a child
- Eyes that are constantly misaligned
- One pupil larger than the other without other ocular symptoms – new onset.
- Blood on the eye (subconjunctival hemorrhage)

#### Schedule within 1 month

- Child not tracking well
- Eyes bobbing (nystagmus ) – Genetic clinic –call Jen Stark
- Droopy eye lid
- One pupil larger than the other without other ocular symptoms
- Chalazion

#### Schedule Next Available

- Longstanding Strabismus, Adults
- Headaches without visual symptoms
- Eyestrain when reading
- Sits too close to TV
- Excessive blinking
- Difficulty when reading
- Abnormal head position/Head Tilt
- Failed vision screening unless more urgent problem above

#### Retinopathy of Prematurity (ROP)

- ALL appointment canceling, and rescheduling calls should go through the ROP coordinator – Vikki Bell 356-0382