



Practice
Plus
Group

Practice Plus Group Ophthalmology

Hampshire macular service referrer pack



Why choose us?



NHS Patients

Free high quality healthcare with short waiting times.

Did you know patients can choose where to have their NHS hospital treatment? Patients that need to see an NHS specialist can choose to access Practice Plus Group as an NHS patient.



Self-pay patients

Affordable options for funding treatment

With an option for patients to pay for themselves, Practice Plus Group offers high quality, consultant-delivered care without the unnecessary extras. It is excellent value for money, with no compromise on clinical outcomes.



Mobile service

Mobile Wet AMD service

Practice Plus Group Ophthalmology provide local mobile services for the treatment of: Wet Age-Related Macular Degeneration (Wet AMD), Diabetic Macular Oedema (DMO), Vein Occlusions (VO) and Neovascular membranes associated with myopia (Myopic CNVM).



Our locations

We're committed to bringing care closer to you

You can find us at our mobile units in Winchester and Nursling. For more information see our site maps on pages 9 and 10.

Reasons to choose Practice Plus Group Ophthalmology



99% of patients surveyed recommended Practice Plus Group Ophthalmology to their friends and family.



The independent regulator of health and social services, CQC, rated Practice Plus Group Ophthalmology as 'Outstanding'.



Practice Plus Group Ophthalmology has a 100% clean record against hospital-acquired infections.

Treatment information

We can treat most macular conditions that respond to Intra Vitreal injections (IVI):

- Wet Macular Degeneration (WAMD)
- Diabetic Macular Oedema (DMO)
- Vein Occlusions (VO)
- Neovascular membranes associated with myopia (Myopic CNVM)

We do not treat:

- Dry AMD
- Epiretinal Membranes
- Macular Holes

Please note:

- All patients with vein occlusions need to be referred by the optometrists to their GP for cardiovascular risk checks as well as being referred to us regardless of whether there is MO or not.
- We treat DMO patients with central retinal thickness of less than 400um as well as over 400um.





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Hampshire macular service

How to refer

We pride ourselves on our fast and effective referral systems. We offer 100% of our patients an appointment inline with national guideline timescales.

To refer a patient to us, you can use several different options:

ERS - We now receive referrals via a RAS (Referral Assessment Service) on ERS, which allows Optoms/GPs to refer in to us without booking an appointment. As a result of the above, searching on ERS the AMD service will be shown as a 'Triage Request' service, rather than an 'Appointment Request' service.

The RAS is published on the secondary care menu on ERS, so it is open to anybody at all to make a referral into the service. The RAS names are in the following format:

OPHTHALMOLOGY - Wet AMD - Nursling - I6T1P

OPHTHALMOLOGY - Wet AMD - Winchester - V0M9T

TEL - 0333 200 4058

Email - practiceplusgrp.AMD.SOUTHAMPTON@nhs.net

Your local optometrist referral network e.g. Opera.



*when searching for a service to refer in to, depending on the distance Practice Plus Group may/may not show – therefore you may need to increase the distance you are searching.

Practice Plus Group Ophthalmology

Wet AMD Rapid access referral form

Name of referring practice: _____ Date of patient exam: _____

Patient details

Name: _____ DOB: _____ NHS number: _____

Address: _____

Contact telephone number: _____

GP name: _____ **GP surgery:** _____

GP address: _____

GP telephone number: _____

OPTOMETRIST DETAILS (please print, do not use a stamp)

Name: _____ Practice: _____

GOC number: _____ Address: _____

Tel: _____ Fax: _____

AFFECTED EYE: Right Left

Past history in either eye Right Left

Previous AMD Right Left

Myopia Right Left

Other Right Left

Referral guidelines

PRESENTING SYMPTOMS IN AFFECTED EYE (one answer must be 'yes')

Duration of visual loss: _____

Please specify _____

1. Visual loss Yes No

2. Central vision loss Yes No

3. Onset of scotoma (or blurred spot) in central vision Yes No

FINDINGS Best corrected VA (must be 6/96 or better in affected eye)

1. Distance VA Right / Left /

2. Near VA Right Left

3. Macular drusen (either eye) Right Left

4. I.O.P reading Right Left

In the affected eye ONLY, presence of:

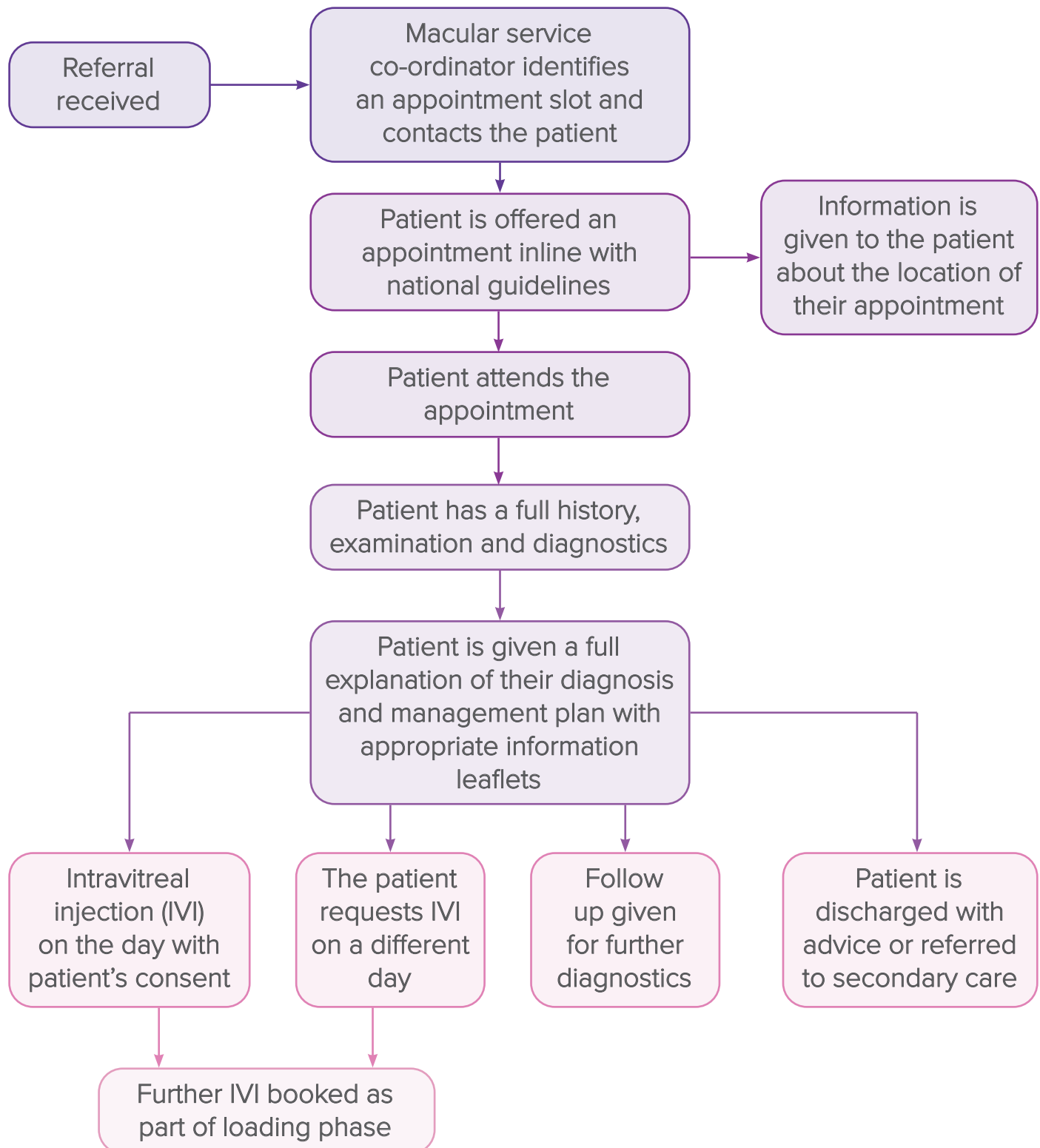
5. Macular haemorrhage (preretinal, retinal, subretinal) Yes No

6. Subretinal fluid Yes No

7. Exudate Yes No

Comments/additional requirements

Patient Pathway



Practice Plus Group, Ophthalmology

Referral information for Wet AMD

Referral acceptance

- Over 18 years old
- Not require general anaesthetic
- Hypertension should be controlled / stable

Referral acceptance notes

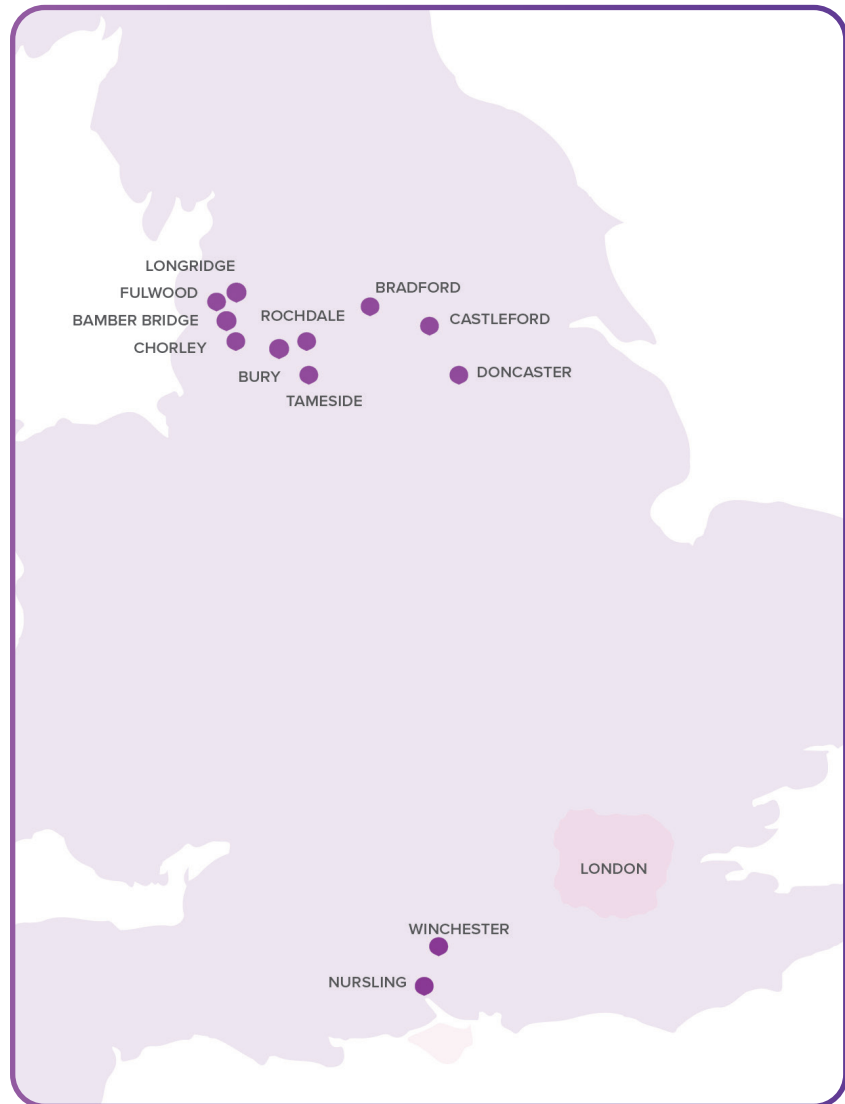
- If a patient is referred and is found to have macular holes, lamellar holes, epiretinal membranes we will accept the referral and complete the scans. The consultant will decide on a suitable management plan, it is usual to treat wet AMD and refer on other the co-morbidities.
- These conditions do not contraindicate intravitreal therapy and we will continue to treat if a patient has treatable AMD. The patient should be referred to a specialist provider for the other conditions. It is usual to treat wet AMD as a priority and to refer onwards for other conditions.
- In case of an emergency such as retinal detachment this is the priority condition and the consultant will need to decide management on a case per case basis referring onwards as appropriate.
- In the circumstance that a glaucoma patient has an IOP is above 24 the consultant will decide if the intravitreal injection (IVI) treatment is urgent and issue a management plan. The patient will be referred on to local ophthalmology service for glaucoma management. But will be continued to be seen by us for Wet AMD treatment.
- In the event of a patient presenting with chalazia or conjunctivitis, we will wait until the condition is clear, due to the risk of endophthalmitis. We will accept the referral and get a baseline OCT scan to determine the urgency of treatment. Antibiotics will be prescribed to clear the infection. The patient will not be treated with active infective disease. Anti VEGF injections should not be performed when there is an infection in or around either eye.
- In patients that have had recent myocardial infarction, stroke, vascular events or unstable angina in the past six months anti VEGF injections should be used with caution and require a consultant management plan evaluating risks and benefits.
- Anti VEGF injections should not be used if patient is trying to become pregnant, during pregnancy or breast feeding.

Practice Plus Group Ophthalmology

Service locations

We currently have mobile sites at:

Bradford,
Bury,
Castleford,
Chorley,
Doncaster,
Fullwood,
Longridge,
Nursling,
Tameside,
Winchester.



The fast-track response service can enhance local patient experience, by improving access and reducing treatment times. With a proven record of successful AMD and macular service delivery, this is an attractive option for patients who choose the service to carry out their Wet AMD treatments.

For more information, please visit our website:
[practiceplusgroup.com](https://www.practiceplusgroup.com)

Practice Plus Group Ophthalmology

Winchester



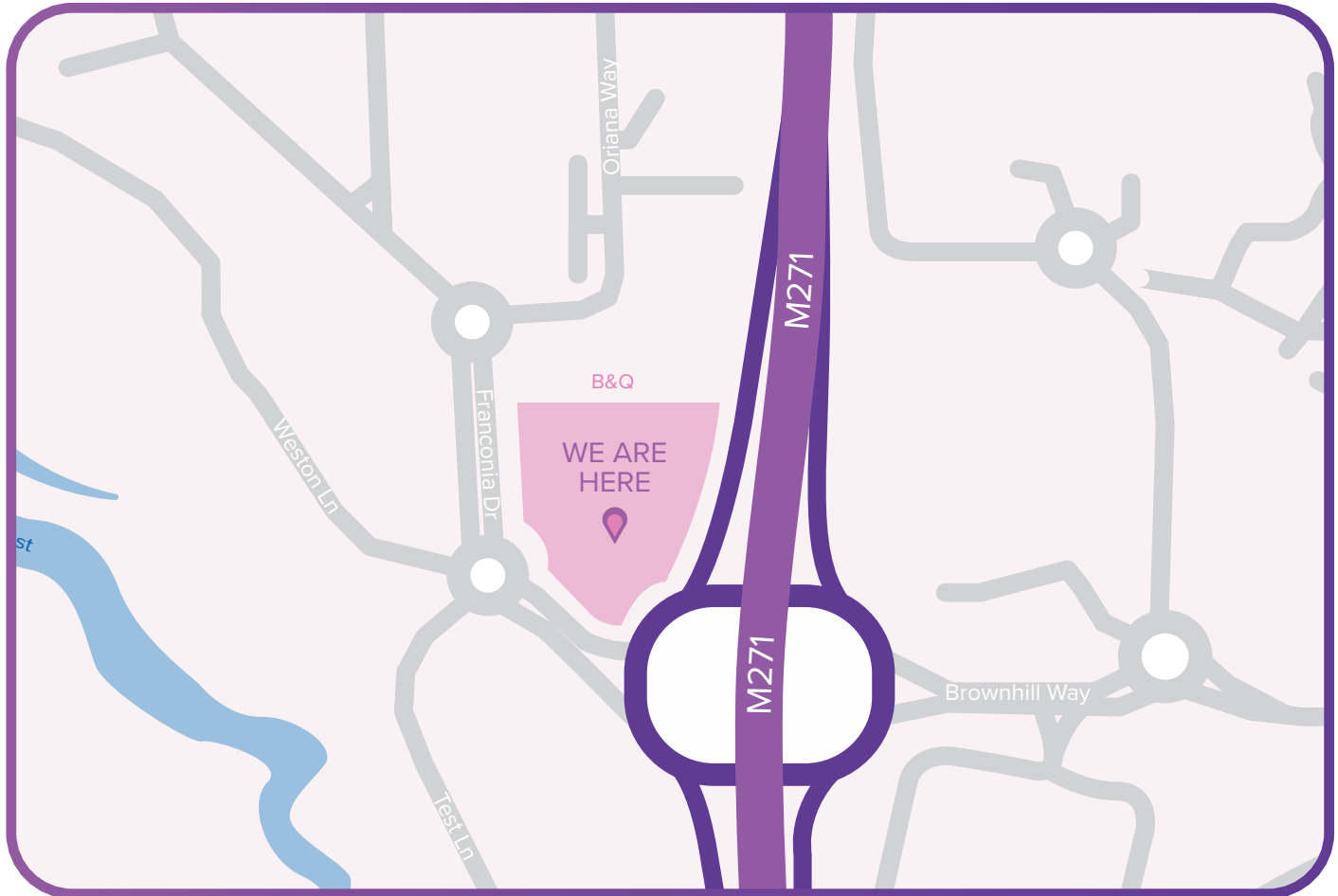
	<p>Nearest bus stops: 2+3 at South park and ride</p>	<p>Nearest train station: Winchester (50 min walk)</p>	
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(For more information please visit www.winchester.gov.uk/parking/park-and-ride)

South Winchester Park & Ride
Winchester,
SO21 2FG

www.southamptonhospital.co.uk

Practice Plus Group Ophthalmology Nursling



Nearest bus stops:

Buses run directly to and from
Mauretania Road, Danebury Way,
Adanac Park and Hillyfields.

Nearest train station:

Redbridge Station	(1.19 mi)
Totton Station	(1.34 mi)
Millbrook Station	(2.74 mi)



B&Q Car Park, Nursling Industrial Estate,
Franconia Dr, Nursling, Southampton,
SO16 0YW

www.southamptonhospital.co.uk

FAQs

1. How long will the appointment take from start – finish?

On a patient's first visit to us, their first appointment will last approximately 30 minutes. For all follow up appointments, approximately 20 minutes.

2. Will I be able to drive to and from the appointment?

We advise patients not to drive to their first appointment as we have to dilate the eyes. It is ok to drive to all follow up appointments.

3. How long is the recovery of AMD injections?

After the AMD injections, patients may feel a gritty/foreign body sensation within the eye ranging between an hour and all day. Patients may see an occasional 'floater' for 48 hours and have blurred vision for 24 – 48 hours. Normally patients will feel better by the next day.

4. Do I need to bring anything to my appointments?

We request that patients bring their prescription glasses and

current medication lists.

5. How many injections will I need to have/how often will I need to have them?

Initially patients will receive three monthly injections as a loading dose. Injections may continue monthly but most patients have the interval extended. Following this, our AMD team will review this and discuss a management plan with the patient. Follow up appointments will be for at least two years.

6. Will the injections hurt?

We use anaesthetic drops in the eye to numb it. You will feel a slight pin prick but most patients tolerate the injections well.

7. Will I go blind?

Very few patients lose their sight. The treatment is designed to stabilise your vision and prevent further loss of vision. In some cases, patients may experience improvement to their vision. Without treatment patients will notice their CENTRAL vision deteriorate but they will maintain their peripheral vision.



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0333 200 4058