## **Covid-19 Pandemic Amber Phase** Notes: Has the patient answered positively to any COVID-19 screening questions? **Patient Prioritisation Flowchart** • Dark blue boxes – triage questions • Pink boxes - optometrist to intervene and When the patient contacts the practice, staff should carry out the continue triage process to determine level, practices standard operating procedure for COVID-19 screening. urgency, and type of care patient requires. • Green boxes – action for staff member Patients can then be triaged using the following Q&A flowchart. YES NO carrying out triage This flow chart is to be used only as guide – you must always use • Local protocols relate to patient pathways your professional judgement to act in the patient's best interests. specific to your practice, to manage those with visual/ocular symptoms. Do they report any visual or ocular symptoms? Do they report any visual YES NO or ocular symptoms? Do they have any urgent issues with their visual correction YES NO (e.g. spectacles broken, run out of contact lenses)? Complete triage form (if available) and alert FAO optometrist. **YES** NO Complete triage form Do not see them in (if available) and alert your practice. Advise Do they have symptoms of a FAO optometrist. them to contact serious eye condition? the practice again Follow local protocols when self-isolation Is the prescription/ Are they at risk of, or have or contact local HES for completed and they specification in date? existing, eye condition(s)? advice. You may offer are well remote consultation to help determine the urgency of care YES NO YES NO YES NO required. Do not see them in your practice Follow locol protocol. Optometrist to Advise that Alert FAO Alert FAO Offer patients use professional replacement Patient should optometrist. optometrist. at higher risk of judgement to spectacles/CLs can COVID-19 the be seen under commissioned determine level of be obtained using Optometrist to Optometrist to choice to postpone existing prescription/ eye care required use professional use professional appointment until acute eye care specification. This on needs- and service (e.g. CUES, judgement to judgement to help restrictions eased should be offered symptoms -led people at a higher EHEW, NIPEARS) consider replacement basis. Offer remote remotely in the first or emergency care spectacles using risk of COVID-19 consultation in first instance. Use remote pathway (Scotland). existing prescription/ make an informed Offer remote instance, or face-todelivery where specification, or choice as to whether face if in patients possible if new sight test consultation in first the risks posed best interests instance or face-tois necessary. Use by COVID-19 THE COLLEGE OF remote delivery outweigh the risk of face if in patients **OPTOMETRISTS** best interests where possible postponing a sight test, where they may be at higher risk of potential or existing Professional Excellence in Eye Health eye condition