Glaucoma Enhanced Case Finding (+/- ASOCT)

AIM
To determine whether patient is at risk of & requires referral to HES for glaucoma

REQUIREMENTS (minimum information noted in referral letter)
- Symptoms or lack of symptoms, as relevant
- Up-to-date refraction/spectacle prescription (within 6 months)
- Vision and/or visual acuity
- Anterior segment examination including anterior chamber depth assessment
- Tonometry by applanation methods (include method and time)
- Stereoscopic disc assessment (include CD ratio)
- Standard automated perimetry (include field plots) – at a minimum suprathreshold, cannot be FDT.
- Review & documentation of any co-morbidity
- Note of presence or absence of risk factors

RISK FACTORS

OPEN ANGLE

Open Angle	Normal Tension
• Age • IOP • Ethnicity • Thin CCT • Family History • Myopia	• Increasing age • Ethnicity • Vascular dysfunction: e.g. migraines, Raynaud's, • History of anaemia, severe blood loss &/or transfusions • Sleep Apnoea • Thin cornea • Family history

CLOSED ANGLE (PACS plus criteria)

Either - limbal chamber depth < ¼ Or – AS- OCT showing irido-trabecular contact (ITC)
AND one of the following (PLUS) criteria:-
• "Only eye" status for occupation or independent living
• Vulnerable adults who may not report ocular or vision symptoms
• Family history of significant angle closure disease
• High hypermetropia (> + 6.00 dioptres)
• Diabetes or another condition necessitating regular pupil dilation
• Those using antidepressants or medication with an anticholinergic action
• People either living in remote locations where rapid access to emergency ophthalmic care is not possible."