URGENT OPHTHALMIC TRIAGE/STREAMING- RED FLAGS								
Acute Angle Closure Glaucoma (AACG)	Central Retinal Artery Occlusion	3 rd Nerve Palsy	Giant Cell Arteritis (GCA)	Orbital cellulitis	Endophthalmitis (Inflammation of interior of eye?)	Penetrating Injury	Chemical Eye Injury	Retinal Detachment
	CRISITE of CASE The Case of C		Temporal artry Opithalanic artry Facial artry Lingual artry	96				Retinal
Red eye with	Sudden acute	Complex	60 years >	Severe orbital	Recent	+/- lid	Check pH	Photopsia
severe eye pain	and painless	condition and	-	pain	intraocular	laceration	-	(Perceived
	loss of vision	may be	May initially		surgery		Eye washout	flashes of
Patient feels		incomplete	start as transient	Eye lid		+/- iris	++	light)
unwell (nausea	Usually caused		loss of vision	swelling &	Reduced vision	prolapse		
& vomiting)	by emboli	Ptosis of eyelid		redness : later				Sudden
		(partial or	Temporal pain	bulging eye	Hypopyon			increase in
Hazy cornea	Eye looks	complete)						floaters & re
	normal		Jaw claudication	Chemosis				or dark spots
Fixed, semi		Pupil may be						vitreous
dilated pupil	Ophthalmoscopy	dilated and may be unreactive	Scalp tenderness	Generally unwell				haemorrhage
Discolured iris	Pale optic disk,	be difference	May feel	diffeen				Shadow or
Discolar Ca II Is	cloudy retina,	Diplopia	generally					curtain over
Hardened	cherry-red spot		unwell, tried,	Can spread via				vision
eyeball	in macula	+/- headache/	depressed	venous				
•		migraine		system to the				
Shallow anterior			Refer to on-call	carvernous				
chamber			medical team	sinus				
			unless sight					
			severely					
			affected					