

Pediatric Ophthalmology Consult and referral guidelines

Introduction

We want to make referrals easy, fast and efficient for primary care providers. This tool was developed to help create productive visits for you and your patient.

Each guideline includes appointment priority guide, common conditions treated, information about each service offered and how to refer.

Feedback regarding these guidelines is encouraged. Please contact your physician liaison to share feedback.

For access to all pediatric guidelines, visit helendevoschildrens.org and type "guidelines" in the search field.

We care for children and teens from birth to 18 years and adults with strabismus or diplopia.

Appointment priority guide

Immediate	Contact HDVCH Direct at (616) 391-2345 and ask to speak to the on-call ophthalmologist.
Urgent	Likely to receive an appointment within 2 days. Contact the Welcome Center at (616) 267-2605 to schedule same-day or next-day appointment. Or, contact HDVCH Direct. Please see below for conditions that are considered urgent.
Routine	Send referral via Epic Care Link, fax completed referral form to (616) 267-1408, or send referral through Great Lakes Health Connect.

All referrals are placed through a triage process. The following qualify as urgent referrals:

- New diagnosis of concern for cataract
- Corneal opacity or corneal ulcer
- Infantile or congenital glaucoma
- Leukocoria/abnormal or no red reflex
- Acute or acquired nystagmus
- Ocular trauma

- Papilledema
- Acute or sudden onset ptosis
- Red eye not responding to treatment or of concern to the PCP
- Conjunctivitis in infant less than 30-days old
- Acute or acquired strabismus
- Sudden vision loss
- Physician request for emergent or urgent consultation/referral

All other referrals are triaged based on patient age and diagnosis.

Infants, children and young adults

American Academy of Pediatrics

Schedule for Visual System Assessment

Assessment	Newborn to 6 months	6-12 months	1-3 years	4-5 years	6 years and older
Ocular history	✓	✓	✓	✓	✓
External inspection of lids and eyes	✓	✓	✓	✓	✓
Red reflex testing	✓	✓	✓	✓	✓
Pupil examination	✓	✓	✓	✓	✓
Ocular motility assessment		✓	✓	✓	✓
Instrument based screening, when available (CPT 99174)		*	✓	✓	✓ Suggested if unable to test visual acuity monocularly with age appropriate optotypes
Visual acuity fixate and follow response	✓ ^	✓	✓		
Visual acuity age-appropriate optotype assessment (CPT 99173)			✓	✓	✓

*"The American Academy of Ophthalmology has recommended instrument-based screening at age 6 months. However, the rate of false-positive results is high for this age group, and the likelihood of ophthalmic intervention is low"

^"Development of fixating on and following a target should occur by 6 months of age, children who do not meet this milestone should be referred"

Visual System Assessment in Infants, Children, and Young Adults by Pediatricians; Committee on Practice and Ambulatory Medicine
Section on Ophthalmology, American Association of Certified Orthoptists, American Association for Pediatric Ophthalmology and Strabismus and American Academy of Ophthalmology
Pediatrics 2016; 137
Published December 7, 2015

Screening Examination of Premature Infants for Retinopathy of Prematurity (ROP)

American Academy of Pediatrics

Recommendation for a retinal eye exam with an ophthalmologist at intervals based on gestational age at birth and subsequent disease severity:

Timing of First Eye Examination Based on Gestational Age at Birth

Gestational age at birth, in weeks	Age at initial examination, in weeks: postmenstrual	Age at initial examination, in weeks: chronologic
22*	31	9
23*	31	8
24	31	7
25	31	6
26	31	5
27	31	4
28	32	4
29	33	4
30	34	4
Older gestational age with high risk factors: consider timing based on severity of comorbidities		4

*"This guideline should be considered tentative rather than evidence-based for infants with a gestational age of 22 or 23 weeks because of the small number of survivors"

Screening Examination of Premature Infants for Retinopathy of Prematurity

American Academy of Pediatrics Section on Ophthalmology, American Academy of Ophthalmology, American Association for Pediatric Ophthalmology and Strabismus, and American Association of Certified Orthoptists

Pediatrics 2013; 131, 189

Published December 31, 2012

Learning Disability, Dyslexia and Vision

American Academy of Pediatrics

Recommend vision screening and referral to ophthalmology.

Joint Technical Report – Learning Disabilities, Dyslexia, and Vision

Section on Ophthalmology and Council on Children with Disabilities, American Academy of Ophthalmology, American Association for Pediatric Ophthalmology and Strabismus, and American Association of Certified Orthoptists

Pediatrics 2011; 127; e818

HDVCH Direct phone: (616) 391-2345

HDVCH developed these referral guidelines as a general reference to assist referring providers. Pediatric medical needs are complex and these guidelines may not apply in every case. HDVCH relies on its referring providers to exercise their own professional judgment with regard to the appropriate treatment and management of their patients. Referring providers are solely responsible for confirming accuracy, timeliness, completeness, appropriateness and helpfulness of this material and making all medical, diagnostic and prescription decisions.