

NI PEARS PLUS PILOT REFERRAL REPORT

Patient Details	NIPEARS Plus Practice Details
Name:	NI PEARS Plus Practitioner:
DOB:	Practice Name:
HCN:	Date:

REFERRAL OUTCOME INFORMATION

Dear Practitioner

Your patient was directed from Belfast Trust Eye Casualty to the NI PEARS Plus Pilot Service.

I carried out the assessment and he/she has been diagnosed with:

Foreign Body Herpes Simplex Keratitis Marginal Keratitis Anterior Uveitis

Other (Please specify) _____

I have:

Provided Advice & Discharged

Provided Management, Treatment & Discharged

Referred patient to secondary care Urgent Routine

Hospital /Dept _____

Comments (as needed) _____

I have advised the patient to return to you, as their usual practice, for their ongoing routine eyecare.

Yours sincerely

_____ NI PEARS Plus Pilot Practitioner