

POLICY STATEMENT

Referral of Persons with Possible Eye Diseases or Injury

Policy

The American Academy of Ophthalmology supports prompt, appropriate referral of individuals to an ophthalmologist when certain signs are observed and/or certain symptoms of possible eye disease or injury are reported.

Background

Many eye diseases, systemic diseases, and injuries that affect the eyes may begin with subtle signs and minimal or barely detectable symptoms. Most of these diseases and injuries require prompt, appropriate medical treatment to minimize the risks of impaired vision or even blindness. Ophthalmologists are medical specialists who are qualified by education, training, and clinical experience to provide total eye care, which includes a vision examination (refraction), a medical eye examination, and necessary medical and surgical care and treatment.

Guidelines

A person who exhibits any of the following signs, symptoms, or diseases should be referred promptly to an ophthalmologist for definitive diagnosis and necessary medical treatment:

- A. Failure to achieve normal visual acuity in either eye, unless the case of the impairment has been medically confirmed by prior examination and visual acuity is stabilized. (Different levels of visual acuity screening for different ages of preschool children have been established to accommodate the maturity of the child.)
- B. Significant eye injury, eye pain, or periocular trauma.
- C. Symptoms of flashes of light; recent onset of floaters, halos, transient dimming, or distortion of vision; obscured vision; loss of vision or pain in the eye, lids, or orbits; double vision; or excessive tearing in the eye.
- D. Transient or sustained loss of any part of the visual field, or clinical suspicion or documentation of such field loss.
- E. Abnormalities or opacities in the normally transparent media of the eye, or abnormalities of the ocular fundus or the optic nerve head.
- F. Tumor or swelling of the eyelids or orbit, or protrusion of one or both eyes.
- G. Inflammation of the lids, conjunctiva, or globe, with or without discharge.
- H. Strabismus or crossed eyes that do not straighten with glasses.
- I. Intraocular pressure at an abnormal level or family history of glaucoma, especially in patients of African or Hispanic origin.
- J. Diabetes mellitus without a recent retinal examination.
- K. Eye and orbital abnormalities associated with thyroid disease (Grave's disease).
- L. Other history, symptoms, or signs that indicate the need for an ophthalmologist to perform an eye examination or treatment.

The following groups of individuals should also be referred promptly to an ophthalmologist:

- HIV-positive patients with ocular symptoms and all patients with AIDS.
- Newborn babies at risk: by prematurity, systemic disease, family history of conditions that cause or are associated with eye or vision problems, or serious ocular symptoms or signs.

Approvals

Approved by: American Academy of Ophthalmology,

Board of Directors, November 1986

Revised and Approved by: American Academy of Ophthalmology,

Board of Directors, June 1992

Reaffirmed by: American Academy of Ophthalmology,

Board of Trustees, September 1995

American Academy of Ophthalmology, Board of Trustees, February 2000

Revised and Approved by: American Academy of Ophthalmology,

Board of Trustees, February 2005

American Academy of Ophthalmology,

Board of Trustees, April 2009

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