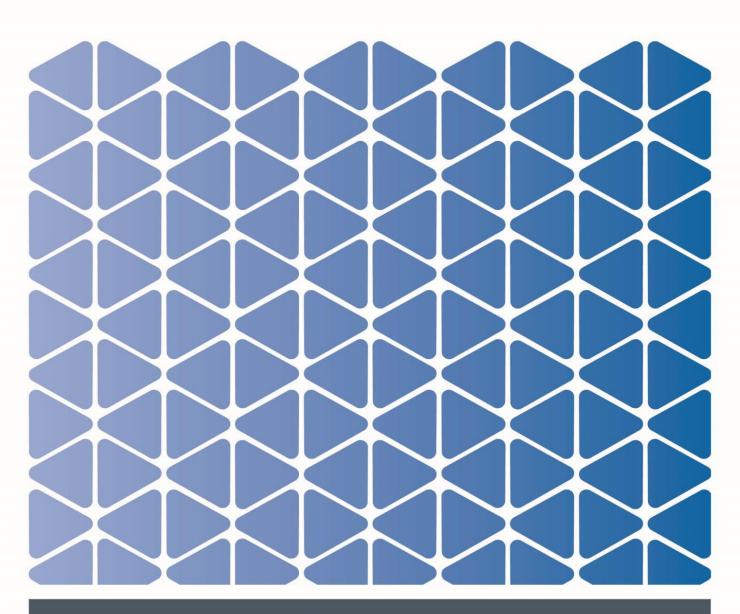




## PATIENT INFORMATION

# **Glaucoma Data Capture Clinic** (GDCC)







#### Glaucoma Data Capture Clinic (GDCC)

#### Information for Patients

## Introduction

The Glaucoma Data Capture Clinic (GDCC) is designed for people whose eyes are affected by ocular hypertension (raised pressure in the eyes), suspected glaucoma, or glaucoma that is reasonably stable.

The optic nerves carry the signals for vision from the eyes to the brain. Glaucoma is a progressive disease of the optic nerves that is commonly associated with increased pressure in the eyes. Though glaucoma cannot be cured, we try to prevent any future loss of vision by using the right treatment and by checking the eyes in outpatient clinics. The GDCC clinic helps us achieve this for the large number of patients who need glaucoma care.

The Glaucoma Team is pleased to tell you that your condition is suitable for the GDCC clinic. In this clinic we will assess your eyes with various tests (see below). Depending on the results, we may recommend a new plan of treatment or just further follow-up.

#### Planning your visit to the GDCC

The appointment usually lasts 30 to 60 minutes. In the clinic, we will not give you the kind of eye drops that dilate your pupils and blur your vision. Therefore, your ability to drive home after the clinic will not be affected. If you have glasses (spectacles) for distance vision (for example, for television or driving), please bring them with you. If you wear contact lenses but also have glasses for distance, please wear the glasses on the day you come to the GDCC. If you wear contact lenses and do not have glasses for distance, please wear the contact lenses to the GDCC, but bring a contact lens case to put them in before we test the pressure in your eyes. At the clinic we will ask you some questions about your eyes. It may be helpful for you to bring with you any eye drops that you use so that you can show us exactly what you are using.

# What happens in the GDCC?

You will not see a doctor in the clinic, but you will have some tests instead. Patients who use wheelchairs can generally have these tests done without difficulty. (If there are particular difficulties we will arrange an appointment in an ordinary clinic). The information we collect will include the results of the following tests:

# Visual Acuity (VA) test

We will test your eyesight by asking you to read a chart of letters while wearing any glasses you have for distance vision (television or driving).

# Intra-Ocular Pressure (IOP) test

We will measure the pressure inside your eyes. We usually use the ORA (Ocular Response Analyser). This machine puffs air into your eye, so that anaesthetic eye drops are not needed.

#### OCT Scan

We will get pictures of the back of your eyes using an OCT (Ocular Coherence Tomography) scanner. This gives us information about how much glaucoma is present.

#### Visual Field Test

This test measures your field of vision (the vision around the object that you are looking at). You will sit with your head close to a white bowl. While you keep your eye fixed on a light at the centre of the bowl, the machine flashes lights in different parts of the bowl. When you see a light flash, you press a buzzer.

#### Central Corneal Thickness (CCT) Test

We may measure the thickness of the cornea (the window of the eye). This test is only done occasionally. We may need to give you anaesthetic eye drops for this test.

## What happens after the GDCC appointment?

Within a few days a member of the Glaucoma Team will check all the information and decide the best plan for your eyes. We will write to you to tell you the plan for treatment and follow-up. The letter will also mention the test results and we will send a copy of the letter to your GP and also, if appropriate, to your optometrist (community optician).

Your GDCC visit will have one of the following three outcomes:

- 1. We will continue to check your eyes in this clinic at appropriate intervals. We will tell you and your GP if we recommend a new treatment with eye drops. Sometimes, if needed, you might be sent an appointment for a 'face-to-face' assessment in an outpatient clinic.
- 2. You may need treatment with laser, in which case we will send you an information leaflet about the treatment. Your appointment for the laser clinic may be sent later. You should read the information leaflet before attending the laser clinic. The leaflet will give you a telephone number that you can use to contact us if you have any questions. When you attend the laser clinic you will have a further chance to ask questions. If you are happy to go ahead with the laser as recommended, we will ask you to sign a consent form before we do the laser.

3. If your eye condition does not require care in a hospital glaucoma clinic you will be discharged. We will then either recommend you have regular eye tests with your optometrist (community optician) or we will refer you for further care by 'Operose' (the community NHS ophthalmology service). In the future, they can refer you back to the hospital if needed.

## What happens if my eye condition gets worse?

If you develop unstable glaucoma, you will be offered an appointment with a Glaucoma Consultant or Specialist. If we find other reasons for concern we will send you an appropriate appointment.

# **Supporting information**

Worcestershire Glaucoma Support group <a href="http://worcestershireglaucomasupport.co.uk/">http://worcestershireglaucomasupport.co.uk/</a>

The Royal College of Ophthalmologists. 2016. Ophthalmic Services Guidance: Standards for Virtual Clinic in Glaucoma Care in the NHS Hospital Eye Service. RCOphth, London.

#### Your comments

We are always interested to hear your views about our leaflet. If you have any comments, please do leave your comments at the reception.

## Telephone numbers for eye clinics between 08-30 am and 5 pm:

Princess of Wales Community Hospital, Bromsgrove: 01527 488198

Worcestershire Royal Hospital: 01905 733569

Kidderminster Treatment Centre: 01562 512382

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

#### **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

#### Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

#### **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

#### **How to contact PALS:**

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

# **Opening times:**

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.