

<b>Clinic Name</b>	Westmead Eye Clinic
<b>Conditions seen</b>	Cataracts with Visual Acuity worse than 6/12 Corneal Disease Diabetic Retinopathy Drug treatment Glaucoma Inherited Retinal Disease Macular Disease Neuro-Ophthalmology Ocular-Plastics Strabismus Referral to surgery within LHD/SHN
<b>Conditions not seen</b>	Routine Screening
<b>Paediatric service</b>	No
<b>Accept referrals from</b>	GP, Optometrist, Ophthalmologist
<b>How to refer</b>	Referral via mail - PO BOX 533, WENTWORTHVILLE 2145 Referral via fax to 8890 6117 Referral via email <a href="mailto:wslhd-eyeclinic@health.nsw.gov.au">wslhd-eyeclinic@health.nsw.gov.au</a> GP/optometrist completes clinic's own referral form – Form soon to be available via website with Referral Guidelines GP/optometrist calls (urgent appointments), 8890 6668
<b>Urgent referrals</b>	GP/optometrist calls (urgent appointments) ON CALL Reg via switch, 8890 5555
<b>Contact</b>	8890 6668
<b>Hours</b>	Monday – Friday 0800-1630hrs
<b>Website</b>	Under Construction
<b>Additional Information</b>	Full Orthoptic Services and Diagnostic Screening ANTI -VGEF SERVICES AVAILABLE IN PRIVATE ROOMS All referrals require triage prior to appointment allocation, Emergency Department referrals