

**How to manage the MHRA National Patient Safety Alert in an English GOS practice**

***NIDEK EyeCee One preloaded and EyeCee One Crystal preloaded Intraocular Lenses (IOLs): risk of increased intraocular pressure (NatPSA/2023/003/MHRA)***

**The safety alert – Intra Ocular Lens (IOL)**

MHRA - [National Patient Safety Alert: NIDEK EyeCee One preloaded and EyeCee One Crystal preloaded Intraocular Lenses (IOLs): risk of increased intraocular pressure (NatPSA/2023/003/MHRA) - GOV.UK (www.gov.uk)](https://www.gov.uk/drug-device-alerts/national-patient-safety-alert-nidek-eyecee-one-preloaded-and-eyecee-one-crystal-preloaded-intraocular-lenses-iols-risk-of-increased-intraocular-pressure-natpsa-slash-2023-slash-003-slash-mhra)

NHS England - [NHS England » National patient safety alert: EyeCee One preloaded and EyeCee One Crystal preloaded intraocular lenses – guidance for commissioners, secondary care providers and primary care optometrists](https://www.england.nhs.uk/publication/npsa-eyecee-one-preloaded-and-eyecee-one-crystal-preloaded-intraocular-lenses/)

**eGOS steps summarised**

* Only applies to 2 types of IOLs
* Explore other services such as MECS / CUES / Post Cataract schemes first
* If no other service available/eligible submit GOS 1/6 via usual methods
* State ‘**INTRAOCULAR**’ in the GOS form’s field box labelled ‘**Patients Previous Surname**’
* Annotate the GOS 1/6 form with an early retest code of ‘**6**’
* Good practice to keep a copy of the surgery provider letter along with the date and outcome of the IOL test in the patient’s clinical records
* Submit the IOP measurement according to the instructions in the Surgery provider letter

**FAQs**

* How do I submit a GOS form for payment for such a presentation
* Make sure the patient brings in the letter from the surgery provider which confirms they have been fitted with the affected IOL
* Submit a GOS 1/6 form for the patient in usual way either via eGOS or via a paper form
* If patient is over 60 years of age, select Over 60 eligibility box on the eGOS or paper GOS 1/6 form
* Ensure you state ‘INTRAOCULAR’ in the patient previous surname box (you can leave out the actual patient’s previous surname from the form on this occasion)
* Ensure you state the early retest code ‘6’ on the eGOS or paper GOS1/6 form
* Try to keep a copy of the patients’ surgery provider letter
* If the IOP measurement is 21 or below, report the measurement in accordance with the instructions outlined in the Patient’s Surgery Provider letter
* If the IOP measurement is 22mmHg or above, telephone the patient’s’ surgery provider and make a referral appointment whilst the patient is still with you (contact details should be included in the providers letter)
* Can I submit a GOS form for such a presentation if the patient is not eligible for GOS
* If the patient is under 60 years of age and not usually eligible for GOS, you can select the eligibility ‘I have been prescribed complex lenses under the NHS Optical Voucher Scheme’ as well as the following steps
* In part 1 under Evidence of Eligibility, tick ‘Not Seen’
* Make sure the patient brings in the letter from the surgery provider which confirms they have been fitted with the affected IOL
* Submit a GOS 1/6 form for the patient in usual way either via eGOS or via a paper form
* Ensure you state ‘**INTRAOCULAR**’ in the patient previous surname box (you can leave out the actual patient’s previous surname from the form on this occasion)
* Ensure you state the early retest code ‘**6**’ on the eGOS or paper GOS1/6 form
* Try to keep a copy of the patients’ surgery provider letter
* If the IOP measurement is 21 or below, report the measurement in accordance with the instructions outlined in the Patient’s Surgery Provider letter
* If the IOP measurement is 22mmHg or above, telephone the patient’s’ surgery provider and make a referral appointment whilst the patient is still with you (contact details should be included in the providers letter)
* Can I only see patients for such a presentation if they have a letter?

All affected patients should receive a letter from their Surgery Provider. The presentation of such a letter will give you assurance that the patient has an affected IOL as part of their recent Cataract surgery

* What do I tell a patient who has no letter from secondary and wishes to be seen under this arrangement

All affected patients should receive a letter from their Surgery Provider. The presentation of such a letter will give you assurance that the patient has an affected IOL as part of their recent Cataract surgery. You can reassure the patient without a letter that it is highly unlikely they are fitted with an affected lens. Signpost them to their Surgery Provider who will confirm this for them.

* How do I send the intraocular pressure measurement information back to secondary care

The Surgery Provider letter will have the specific details as to how the information should be relayed to the surgery provider

* Do I have to keep a copy of the letter from secondary in the patient records

It is advisable for you to keep a copy of the Patient’s Surgery Provider letter in the patient clinical records

* Does it make a difference how the intraocular pressures are measured?

IOPS can be measured using any instrument, both applanation and non-contact tonometry is acceptable. If using non-Contact tonometry, bear in mind the average measurements readings advised by the college of optometrists. If the reading (average for NCT) is more than 22 or above, the performer is required to telephone the named contact on the Patient’s Surgery Provider letter to arrange a follow up appointment. If the reading is (average for NCT) 21 or below the performer needs to report the findings using the instructions in the Patient’s Surgery Provider letter.

* Do I have to do a full sight test or just measure the intraocular pressures?

The minimum requirement is for an IOP test. However, if in the clinical judgement of the optometrist it is felt that a full sight test is required then this can also be provided via GOS. The same fee will be payable to a contractor whether the full sight test has been conducted or just the IOP measurement. Usual rate of GOS1/6 fee is applied

* Does a performer have to measure the IOP or can it be delegated to a non-registrant?

If the performer deems only an IOP measurement is required and not a full sight test, it can be delegated to a non-registrant. However, they would still need a performer on the premises and in a position to intervene if necessary

* I don’t have access to NHS mail, how do I send the information back to secondary care?

Information to secondary can be returned via post. NHS mail and/or Egress accounts can be requested by completing the form [NHS mail address/Egress request form (Page 1 of 7) (office.com)](https://forms.office.com/pages/responsepage.aspx?id=ggRtz7GGiE-MDDtN5MtALKzkTB6RQL1Cpy9i_MYGRBpUOTA5MjBOMTk0SExWU1VEUU5DMkU3NVRUQSQlQCN0PWcu)

Egress accounts do not require the completion of the DSPT toolkit, are quicker to setup and all performers and contractors without a current NHS mail account can apply for one. It does set limits to the number of secured emails an account can send and receive free of charge

* Can I refuse to see a patient with such a presentation?

It would not be advisable to refuse a GOS test / IOP measurement to such a patient presentation. The risk and urgency for a patient with such a presentation is significant, especially if a crucial test such as IOP measurement is refused. If for a valid clinical or GOS contractual reason you deemed it necessary to refuse to see the patient, you must make a record of it in the GOS eye test refusal log which all GOS contractors should have and at the very least signpost the patient to an alternative GOS provider

* What level of IOPs do I need to refer or inform? What do we do with asymmetry of IOPS?
	+ Referral required back to Surgery provider for any IOP of 22mmHg or above
	+ Reporting of IOP measurements required for any IOP of 21mmHg or below
	+ Clinically consider if referral required for any significant asymmetry of IOPs, taking into account clinical guidance from COptom and which eye has had the IOL
* If a patient is seen under GOS for a full sight test or just IOPs under this presentation, does it have any impact on their future GOS sight test due date

The GOS sight test conducted under this presentation should have no bearing on the date of the patient’s next sight test so normal recall periods still apply

* Submitting a GOS 1 or 6 form having completed only an IOP measurement and not a full sight test goes against the GOS regulations. Is there a possibility that doing so could jeopardise my GOC registration?

You’re acting on instruction from NHS England and no action will be taken on account of using the GOS form to submit a payment claim in this scenario, provided the form has been annotated correctly.