## **Urgent Retinal Detachment Referral Letter**

**URGENT REFERRAL** 

Dear Dr. [Ophthalmologist Name],

I am referring [Patient Name], DOB: [Date of Birth], for immediate evaluation of suspected retinal detachment.

CLINICAL FINDINGS: Patient presented today with sudden onset of [flashes, floaters, visual field loss]. Dilated fundus examination revealed [specific findings: retinal tear location, extent of detachment, vitreous hemorrhage]. Visual acuity: [measurements]. IOP: [measurements].

This patient requires urgent surgical consultation. I have advised the patient of the serious nature of this condition and the need for immediate specialist care.

Patient contact: [Phone Number]

Time of examination: [Time]

Please contact me immediately at [Your Phone] if you need any additional information.

Urgent regards,

[Your Name], OD

[Contact Information]

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