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| |  |  |  | | --- | --- | --- | |  |  |  | |  |  | Surgery name and address | | XX/YY/2020 |  | | /SS |  | |  |  | |  |  | |  |  |  | | Our ref: |  | Tel: | |  | Email: | |  | Website: | |  |  | |
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**OPHTHAMOLOGY**

**eRS**

Dear Colleagues

**Mr/Mrs XXX YYYYY DOB**

**Address Line 1 NHS No:**

**Address Line 2 Home Tel:**

**Town Mobile**

**County**

**Postcode**

The Medicines Management Team has raised with us that new guidelines from the Royal College of Ophthalmologists are suggesting that patients have baseline reviews with a Macular Specialist ideally within 12 months of the initiation of Hydroxychloroquine, and annual reviews after 5 years. Information provided below as requested:

* Hydroxychloroquine started/managed by: *(insert consultant name and Trust)*
* Start date and initial dose:
* Current dose (include date of dose adjustment if known):
* Last recorded weight and date:
* EGFR (if less than 60):
* Tamoxifen treatment (dates):

This patient is on Hydroxychloroquine and has either not had a baseline assessment or an annual review in accordance with the guidelines.

I would therefore be grateful if you could see this patient who has been taking Hydroxychloroquine and does have additional risk factors.

Yours sincerely,

**Electronically checked and signed**

Dr XXXX YYYY

(Usual doctor - YYYYY, Zzzz (Dr))