

eReferral and Ophthalmology Cataract Central Intake in Waterloo Wellington

The development of an Ophthalmology Central Intake that incorporates the use of eReferral will enable optometrists and primary care providers to make complete and accurate cataract referrals

Using eReferral and a centralized intake model leads to...



Reduced wait times

Research shows that using eReferral and implementing a central intake resulted in the reduction of wait times from **14 weeks to 4 weeks**¹



Quicker referral processing

eReferrals are processed **approximately 22 days faster** at central intake on average compared to fax referrals²



Improved communication

Patients and providers stay more informed through the **automated email notifications** that eReferral sends throughout the referral journey

Quick Facts

- The central intake for ophthalmology cataract services triages referrals based on one of the following patient preferences:
 - Shortest wait time
 - Geography
 - Provider
- eReferral has been shown to support **feasible, fast** and **safe** patient referrals to ophthalmology services³
- eReferral enables integrated communication through the eReferral solution – improving referrers' ability to track referral status and communicate with specialists

“Empowering referring providers with information on wait times and surgeons (available through Ocean eReferral) will improve the eye care pathway for patients. The regional central intake model is built around patient choice and will help us utilize surgical resources more effectively”

Chryssa McAlister, MD
Waterloo Regional Eye Program

For more information, email communications@ehealthce.ca.

References

1. Khan, A. A., Mustafa, M. Z., & Sanders, R. (2015). Improving patient access to prevent sight loss: ophthalmic electronic referrals and communication (Scotland). *Public Health*, 129(2), 117–123.
2. Mohammed, H. T., Payson, L. A., & Alarakhia, M. (2020). The impact of integrating electronic referral within a musculoskeletal model of care on wait time to receive orthopedic care in Ontario. *Plos one*, 15(11), e0241624.
3. Borooh, S., et al. (2013). Using electronic referral with digital imaging between primary and secondary ophthalmic services: a long term prospective analysis of regional service redesign. *Eye*, 27(3), 392-397.