

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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## GOS Changes Guidance

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## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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## General Ophthalmic Services (GOS) Changes

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## Creating an account and accessing Ophthalmic Webforms

If you do not have an eOphthalmic account yet, you will need to complete a username and password form and send this form to practitioner services. To access the form and further information about this, please visit the following link:

<https://www.nss.nhs.scot/ophthalmic-services/eophthalmic/how-to-set-up-an-eophthalmic-account/>

After an account has been created for you, you will be able to access the eOphthalmic Web Payments page via this link:

<https://eophthalmics.mhs.scot.nhs.uk/>

Please remember that you will need a secure NHS network to access the eOphthalmic Web Payments. Alternatively, you can use an IPsec tunnel. These solutions allow a safe transfer of confidential data.

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## General Ophthalmic Services (GOS) Changes

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## Logging in



### eOphthalmic Web Payments

Welcome to the eOphthalmic webforms service.

This service is for authorised users only. Anyone attempting unauthorised access will be considered for appropriate legal action.

By entering claim and patient data using this service you are able to store and submit payment claims electronically to Practitioner Services for processing. Under the Data Protection Act you are the data controller for such personal health data.

For general information, forms and guidance browse our National Services Scotland website at <https://www.nss.nhs.scot/browse/ophthalmic-services>

Alternatively contact Practitioner Services Customer Service team on 0131 275 6300 or email [nss.psdophthalmic@nhs.scot](mailto:nss.psdophthalmic@nhs.scot)

The Customer help desk hours are Monday to Thursday 0830 until 1630, Friday 0830 until 1600.

Other resources for professionals involved in providing eye care services in Scotland which include the Community Glaucoma Service are available at [www.eyes.nhs.scot](http://www.eyes.nhs.scot).

User Name

Password

[Unable to login?](#)

### SYSTEM OUTAGE EXAMPLE MESSAGE

eOphthalmic web form has been updated to 3.0.0.0.

### Logging in

You need to log in to eOphthalmic Web Payments using the username and password provided by us.

If you have received a username and password, but do not remember the details or you have been locked out of your account, please contact Practitioner Services: [nss.psdophthalmic@nhs.scot](mailto:nss.psdophthalmic@nhs.scot) or 0345 034 2458

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## General Ophthalmic Services (GOS) Changes

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## Selecting the Optometry Practice

# Select Optometry Practice

Optometry Practice:

Continue

### Select Optometry Practice

Once you have logged in, select the practice you wish to submit a claim from. A drop down will appear when you click into the field. If you work in multiple practices they will show in the drop down.

If you do not see your practice on the list, the practice manager or staff will need to contact Practitioner Services on your behalf to have a practice location code added for you:

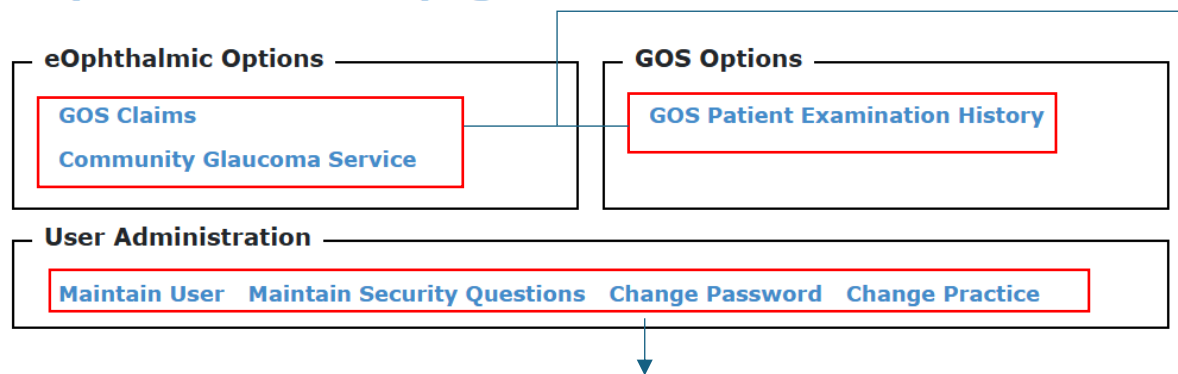
[nss.psdophthalmic@nhs.scot](mailto:nss.psdophthalmic@nhs.scot) or 0345 034 2458

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Selecting a Service

### eOphthalmic Homepage



### Selecting a Service

The eOphthalmic homepage will then allow you to select GOS Claims or Community Glaucoma Service (CGS). You can also carry out a GOS Patient Examination History Search.

This guidance will cover GOS Claims only. A separate guidance is available via this link: [CGS Guidance | National Services Scotland](#)

### Administration

This page also provides you with administrative options to manage your account. This includes:

- "Maintain User" which allows you manage your account details.
- "Maintain Security Questions" which allows you to manage the security questions to access your account
- "Change Password" which allows you to choose a new password
- "Change Practice" which allows you to select a different practice if you have selected the wrong practice by accident

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## General Ophthalmic Services (GOS) Changes

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The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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## GOS Patient Examination History

### Patient Details

## GOS Patient Examination History

Patient Details	Primary Examination	Supplementary Examination	Prescription	Visual Acuity
<b>CHI Number</b> <input type="text"/>	<b>Forename</b> <input type="text" value="JOE"/>	<b>Surname</b> <input type="text" value="BLOGGS"/>		
<b>DoB</b> <input type="text" value="01/01/2025"/>	<b>Sex</b> <input type="text" value="MALE"/>			

[Return to Ophthalmic Homepage](#) [Previous](#) [Next](#) [Create New Claim](#)

### Patient History – Patient Details

After you have selected “Proceed with Patient”, you will be presented with the relevant patient data in a tabular format. The information includes Patient Details, last Primary Examination Details, last Supplementary Examination Details, Prescription details (for the last claim containing prescription information), and Visual Acuity details (for the last claim containing prescription information).

The Patient Details tab will show the patient’s CHI, Forename, Surname, Date of Birth, Sex and Postcode.

You will note that at the bottom right-hand side, you will have the option to “Create New Claim” without having to return to the homepage.

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## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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## Primary Examination History

### GOS Patient Examination History

Patient Details	<b>Primary Examination</b>	Supplementary Examination	Prescription	Visual Acuity
-----------------	----------------------------	---------------------------	--------------	---------------

<b>Primary Date</b>	<b>01/10/2025</b>	<b>Under 60</b>
Address line 1		
Address line 2		
Address line 3		
<b>Postcode</b>	postcode	
<b>NHS Email</b>		

[Return to Ophthalmic Homepage](#) [Previous](#) [Next](#) [Create New Claim](#)

### Patient History – Primary Examination

The Primary Eye examination tab will provide the following details of the patient's last primary eye examination: the date, the primary examination type, the practice address and the practice email address.

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## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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## Supplementary Examination History

### GOS Patient Examination History

Patient Details	Primary Examination	Supplementary Examination	Prescription	Visual Acuity																		
<table border="1"><tr><td><b>Supplementary Date</b></td><td><b>01/11/2025</b></td><td><b>3.8 Unscheduled Appointment</b></td></tr><tr><td colspan="3">Address line 1</td></tr><tr><td colspan="3">Address line 2</td></tr><tr><td colspan="3">Address line 3</td></tr><tr><td><b>Postcode</b></td><td colspan="2">postcode</td></tr><tr><td><b>NHS Email</b></td><td colspan="2"></td></tr></table>					<b>Supplementary Date</b>	<b>01/11/2025</b>	<b>3.8 Unscheduled Appointment</b>	Address line 1			Address line 2			Address line 3			<b>Postcode</b>	postcode		<b>NHS Email</b>		
<b>Supplementary Date</b>	<b>01/11/2025</b>	<b>3.8 Unscheduled Appointment</b>																				
Address line 1																						
Address line 2																						
Address line 3																						
<b>Postcode</b>	postcode																					
<b>NHS Email</b>																						

[Return to Ophthalmic Homepage](#) [Previous](#) [Next](#) [Create New Claim](#)

### Patient History – Supplementary Examination

The Supplementary Eye examination tab will provide the following details of the patient's last supplementary eye examination: date, Supplementary examination reason code, Supplementary Examination Description, practice name and address, practice email.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Prescription History

### GOS Patient Examination History

Patient Details Primary Examination Supplementary Examination **Prescription** Visual Acuity

Prescription Date 01/10/2025 GOS1 Primary

Right						Left					
Sph.	Cyl.	Axis	Prism	Base		Sph.	Cyl.	Axis	Prism	Base	
+/-	+/-					+/-	+/-				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

D

N

[Return to Ophthalmic Homepage](#) [Previous](#) [Next](#) [Create New Claim](#)

### Patient History – Prescription

The Prescription tab will provide details of the last prescription submitted for the patient including: the date of last prescription; the claim type (e.g. GOS1); and the prescription values.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Visual Acuity History

### GOS Patient Examination History

Patient Details Primary Examination Supplementary Examination Prescription **Visual Acuity**

Visual Acuity Date	01/10/2025	GOS1	Primary
<b>Right</b>			
<input type="text" value="10/10"/>	D	<input type="text" value="5/5"/>	D
<input type="text"/>	N	<input type="text" value="6/8"/>	N
<b>Left</b>			
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<b>Binocular</b>			
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	

[Return to Ophthalmic Homepage](#) [Previous](#) [Next](#) [Create New Claim](#)

### Patient History – Visual Acuity

The Visual Acuity tab will provide details of the last visual acuity details submitted for the patient including: date of last prescription including visual acuity; claim type where visual acuity was included; whether the claim was a primary or supplementary examination; and right, left and binocular visual acuity details.

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## Creating a GOS Claim

### GOS Service

#### GOS Claim Options

[Create GOS Claim](#)

[GOS Claim Management](#)

[Back to Ophthalmic Homepage](#)

### Select a GOS Service

This page will present two options.

The first option is “Create GOS Claim” which will allow you to create a new GOS Claim.

The second option is “GOS Claim Management” which will allow you to manage your existing claims. This option will take you to the “Review Claims” page showing a list of claims that have either been submitted, parked, or failed to submit due to errors. This Review Claims page will be covered further below.

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### Identify Patient and History

## Identify Patient and History



The screenshot shows a form with the following fields and controls:

- CHI**: A text input field with a vertical cursor.
- Forename\***: A text input field.
- Surname\***: A text input field.
- Date of Birth\***: A date picker field with a calendar icon.
- Sex\***: Radio buttons for  Male and  Female.
- Postcode**: A text input field.
- \* - mandatory field**: A legend at the bottom left of the form.
- Cancel**: A button at the bottom left.
- Submit**: A button at the bottom right.

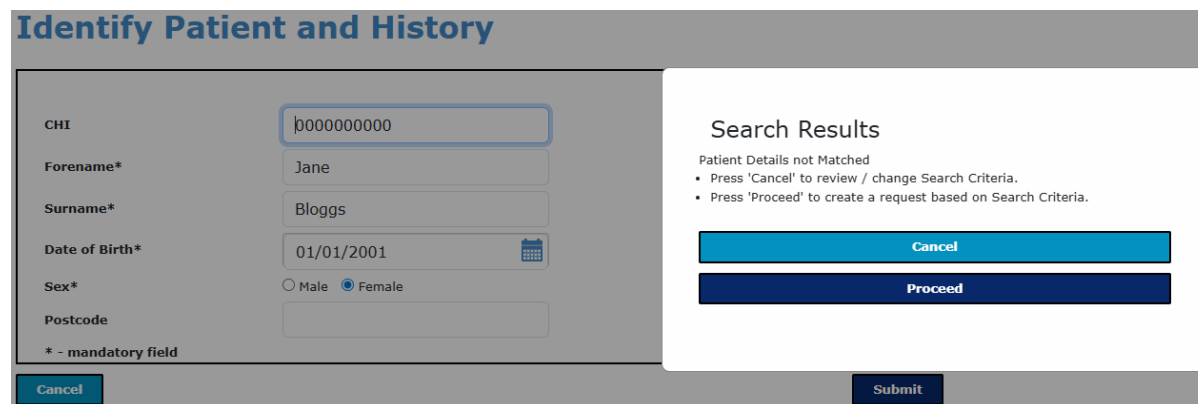
### Patient Search

When you select “Create GOS Claim”, you will be prompted to carry out a patient search. All fields marked with an asterisk are mandatory. If you fail to complete a mandatory field, an error message will appear.

Unlike CGS claims, the Community Health Index (CHI) number is not mandatory for GOS claims.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

### Patient Matching – Result 1



**Identify Patient and History**

CHI: 0000000000

Forename\*: Jane

Surname\*: Bloggs

Date of Birth\*: 01/01/2001

Sex\*:  Male  Female

Postcode:

\* - mandatory field

Search Results

Patient Details not Matched

- Press 'Cancel' to review / change Search Criteria.
- Press 'Proceed' to create a request based on Search Criteria.

Buttons: Cancel, Proceed, Submit

### Patient Matching – Result 1

You may receive a result like the image above if the system is unable to match the patient details to an existing patient. This means that the patient has not previously received GOS.

In this case, you can create a new record for the patient when you select “Proceed”.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Patient Matching - Result 2

	Patient Search Criteria	Found Patient Details
CHI	0000000000	0000000000
Forename	Jane	Jane
Surname	Bloggs	Bloggs
Date of Birth	00/00/0000	00/00/0000
Sex		Female
Post Code		
Last GOS Primary Eye Examination		01/01/2024
CGS Registered		<a href="#">Yes - Details</a>
Last CGS Primary Assessment		01/02/2024
	<a href="#">Proceed with Search Terms</a>	<a href="#">Proceed with Patient</a>

### Patient Matching – Result 2

If there is a patient with details that match what you have entered, you will be presented with this screen. The 'Patient Search Criteria' which are the details you entered, and the 'Found Patient Details' which is what the search has brought back.

If you are satisfied with this match, you can select the dark blue option "Proceed with Patient". If you are not satisfied with this match, you can select "Proceed with Search Terms" which is the light blue option. You can also click "Yes – Details" if it is a CGS Registered patient and you wish to see the CGS Provider details.

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## General Ophthalmic Services (GOS) Changes

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## GOS Claim Selection

### Create GOS Claim

- GOS1 Ophthalmic Eye Examination Primary
- GOS1 Ophthalmic Eye Examination Supplementary
- GOS1 Ophthalmic Eye Examination Both
- GOS Specialist Supplementary Eye Examination
- GOS3 Optical Voucher & Patient Statement
- HES3 Optical Voucher & Patient Statement
- GOS4 Optical Repair/Replacement

[Back to Ophthalmic Homepage](#)

### Selecting a GOS Claim

After you have carried out the patient search, you will be presented with a list of GOS Claims and a HES3 Claim to choose from. As you can see “GOS Specialist Supplementary Eye Examination” is now also on the list.

**Please remember that you must be a GOS-SS approved IP in order to submit a GOS-SS. This option is available to all users, but please do not select this option unless you are a GOSS-SS approved IP.**

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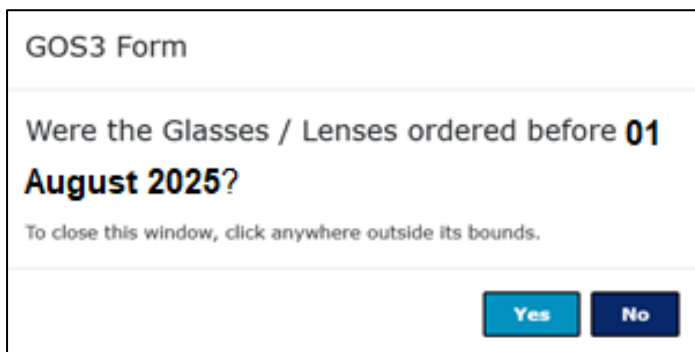
## General Ophthalmic Services (GOS) Changes

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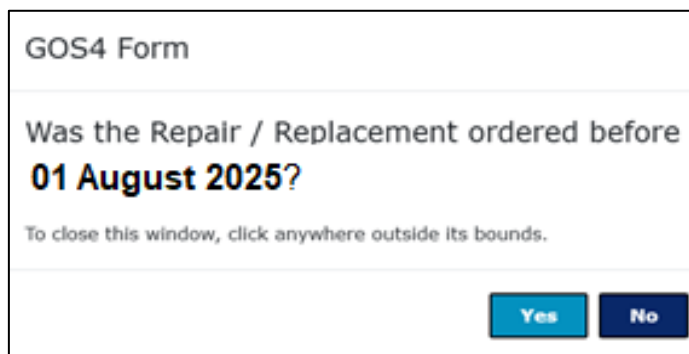
### Selecting Old Format and the New Format of the webform



GOS3 Form

Were the Glasses / Lenses ordered before **01 August 2025?**

To close this window, click anywhere outside its bounds.



GOS4 Form

Was the Repair / Replacement ordered before **01 August 2025?**

To close this window, click anywhere outside its bounds.



GOS1 Primary & Supplementary Form

Was the activity carried out **BEFORE 1st August 2025**

To close this window, click anywhere outside its bounds.

### Selecting Old Forms or New Forms

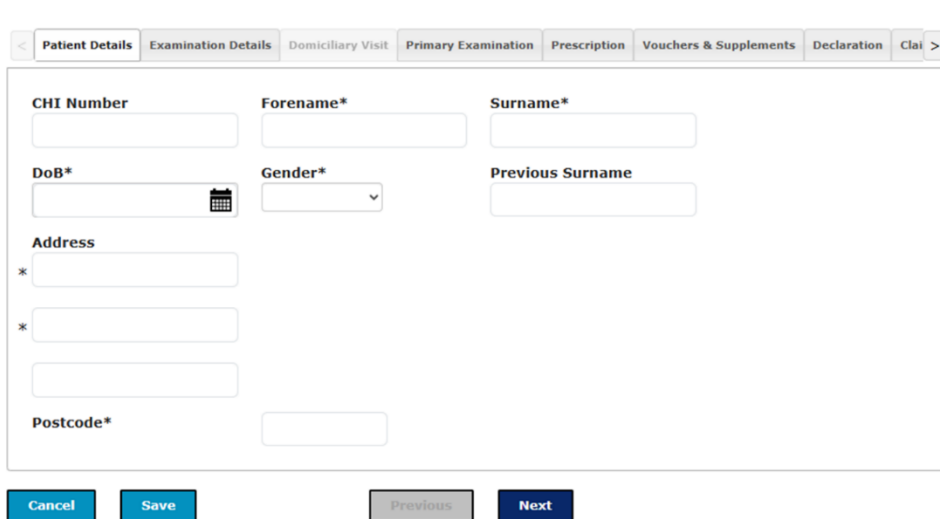
From the 1<sup>st</sup> of August 2025, if you select GOS1, GOS3 or GOS4, you will receive a pop-up. This is a prompt requesting you to indicate whether the activity was carried out before 1 August 2025. If the activity was carried out before 1 August 2025, please select “YES” which will then take you to the old form.

If the activity was carried out on or after 1 August 2025, please select “NO” which will then take you to the new form.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

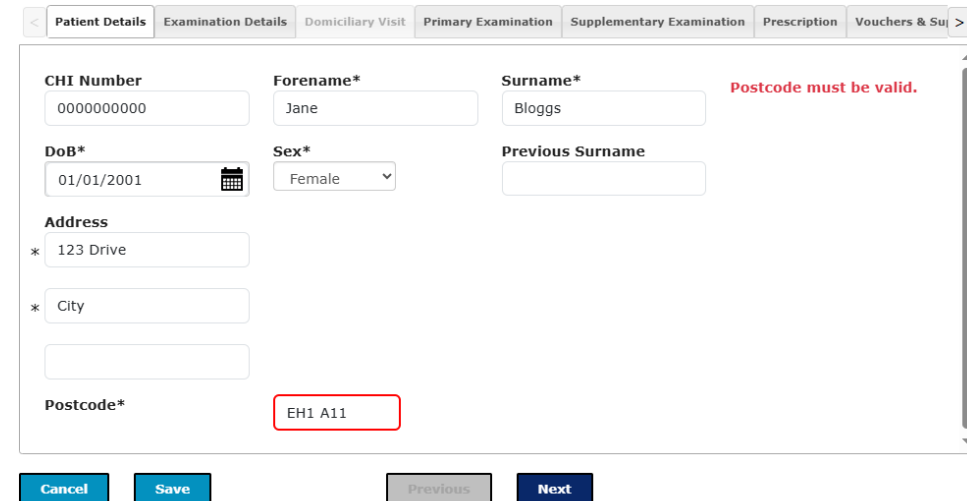
## Patient details (GOS1, GOS3, GOS4, GOS(SS), HES3)



This screenshot shows the 'Patient Details' form with the following fields:

- CHI Number
- Forename\*
- Surname\*
- DoB\* (with calendar icon)
- Gender\* (dropdown menu)
- Previous Surname
- Address (three lines, each with an asterisk)
- Postcode\*

Navigation buttons: Cancel, Save, Previous, Next.



This screenshot shows the 'Patient Details' form with the following fields filled in:

- CHI Number: 0000000000
- Forename\*: Jane
- Surname\*: Bloggs
- DoB\*: 01/01/2001 (with calendar icon)
- Sex\*: Female (dropdown menu)
- Previous Surname
- Address: \* 123 Drive, \* City
- Postcode\*: EH1 A11

An error message 'Postcode must be valid.' is displayed in red text at the top right of the form area.

Navigation buttons: Cancel, Save, Previous, Next.

### Completing Patient details

When you have selected “No” for GOS1, GOS3, GOS4, or if you have selected GOS(SS) or HES3, you will be presented with a form that looks like the image above.

If you have entered invalid information, you will receive an error message on the right hand side of the screen (see image on the right above).

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## GOS1

### Examination Details

The screenshot shows the 'Examination Details' tab of a web form. The form includes several sections:

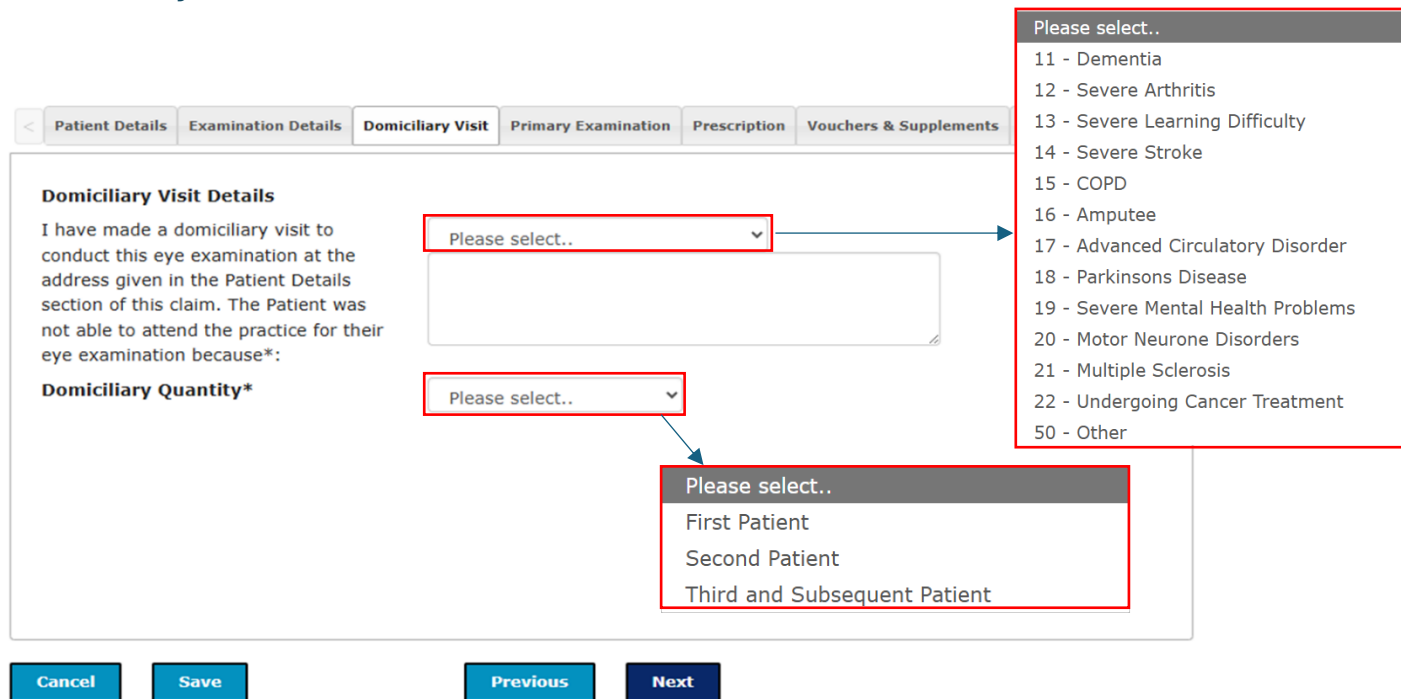
- Reason for Examination\***: A dropdown menu with 'Please select..' selected. An arrow points to a dropdown menu with the following options: Recall, Self-Referrred, Referred by GOS Only Optometrist, Referred by a General Practitioner, Referred by a Hospital, Referred by another healthcare professional, and Referred by an NHS hospital for cataract post-op review.
- Patient Has/Is\***: A list of checkboxes for conditions: None, Diabetes, Had Cataract surgery/pseudo-aphakic, Myopia, Ocular Hypertension, AMD with associated reduced Visual Acuity, A Smoker, Glaucoma, Cataract with associated reduced visual acuity, and Corrective Refractive Error. Below these are two paragraphs of text explaining registration criteria for sight impairment.
- Was this a First Port of Call Presentation\***: Radio buttons for 'No' and 'Yes', with a note: 'Please select for every patient presenting with an acute eye condition to your practice, regardless of patient journey to presentation.'
- Patient was referred to\***: A dropdown menu with 'Please select..' selected. An arrow points to a dropdown menu with the following options: Not Referred, Hospital, GP, Care, and Another Optometrist.
- Domiciliary Visit\***: Radio buttons for 'No' (selected) and 'Yes'.

### Completing Examination details

On this tab, you will be able to enter the relevant details relating to the Examination. Any field marked with an asterisk (\*) is mandatory. The patient conditions have now been revised and there has now also been the addition of the "First Port of Call" option. You can also select "YES" or "NO" for Domiciliary Visit. If you select "No" the following tab will be faded out and skipped. If you select "YES", you will be able to complete the following tab. See image below.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Domiciliary Visit



The screenshot shows a web form with a navigation bar at the top containing tabs: Patient Details, Examination Details, **Domiciliary Visit**, Primary Examination, Prescription, and Vouchers & Supplements. The main content area is titled "Domiciliary Visit Details" and contains the text: "I have made a domiciliary visit to conduct this eye examination at the address given in the Patient Details section of this claim. The Patient was not able to attend the practice for their eye examination because\*:". Below this text is a text area for "Domiciliary Quantity\*" with a dropdown menu. Two dropdown menus are highlighted with red boxes. The top dropdown menu is open, showing a list of conditions: 11 - Dementia, 12 - Severe Arthritis, 13 - Severe Learning Difficulty, 14 - Severe Stroke, 15 - COPD, 16 - Amputee, 17 - Advanced Circulatory Disorder, 18 - Parkinsons Disease, 19 - Severe Mental Health Problems, 20 - Motor Neurone Disorders, 21 - Multiple Sclerosis, 22 - Undergoing Cancer Treatment, and 50 - Other. The bottom dropdown menu is also open, showing options: First Patient, Second Patient, and Third and Subsequent Patient. At the bottom of the form are buttons for Cancel, Save, Previous, and Next.

## Domiciliary Visit

If you select "YES", you must complete Domiciliary Visit Details.

If you have selected "Other", please enter details in this regard in the field directly underneath.

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## General Ophthalmic Services (GOS) Changes

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The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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## Primary Examination

### Primary Examination details

On this tab, you will be able to enter the relevant details relating to the Primary. The 'Primary Eye Examination Fee Type' has been revised to include four options based on whether the patient is over 60 and whether their eyes were dilated.

There has also been the addition of 'Student Optometrist Examination'. If you select "YES" for this, you will need to enter the Student GOC Number.

There has been no change to Early Eye Examination Reason Codes: If the patient is new to the practice, please select code 7. And if the patient has turned 16, then please select code 8.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

< Patient Details Examination Details Domiciliary Visit **Primary Examination** Prescription Vouchers & Supplements Declaration Clai >

**Primary Eye Examination Fee Type:\***

**Examination Date:\***

**Refraction Carried Out:\***  No  Yes

**Prescription\***  No Change or No Prescription  New or Changed

**Date of Previous NHS eye examination**

**Early Eye Examination Reason Code:**

**Student Optometrist Examination?**  No  Yes **Student GOC Num:** SO-

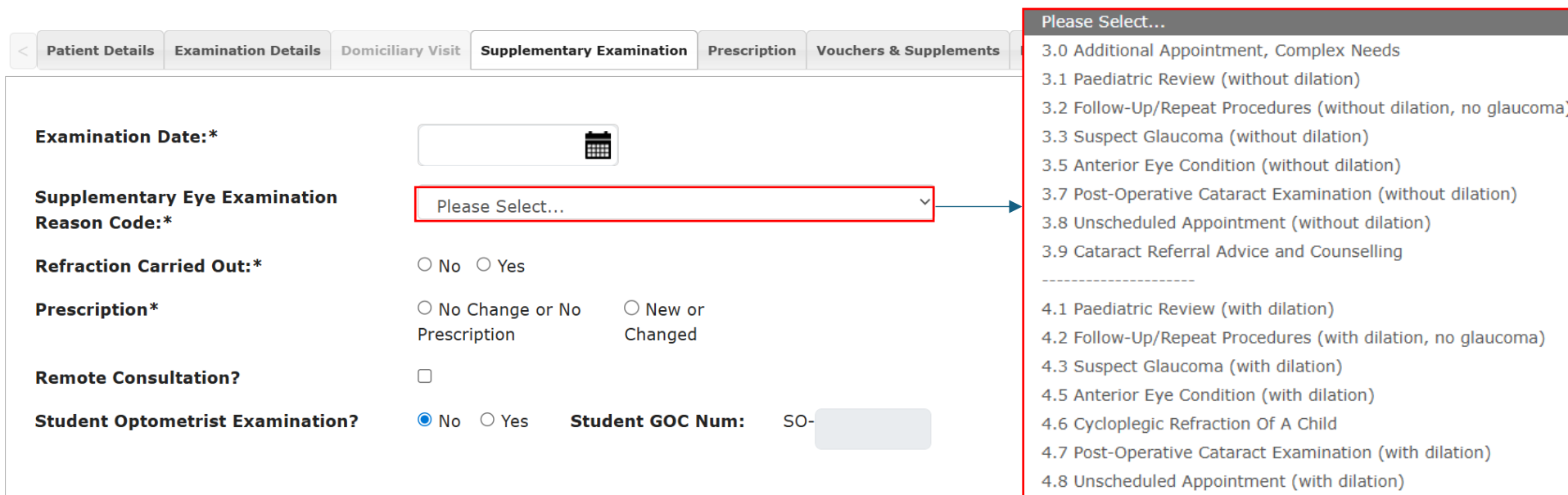
Patient aged under 60 whose pupils are not dilated  
Patient aged under 60 whose pupils are dilated  
Patient aged 60 or over whose pupils are not dilated  
Patient aged 60 or over whose pupils are dilated

Please Select...  
7 - Patient is new to Practice  
8 - Patient turned 16

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Supplementary Examination



The screenshot shows a web form with several tabs: Patient Details, Examination Details, Domiciliary Visit, Supplementary Examination (selected), Prescription, and Vouchers & Supplements. The form contains the following fields:

- Examination Date:\*** A date picker field.
- Supplementary Eye Examination Reason Code:\*** A dropdown menu currently showing "Please Select...". A red box highlights this dropdown, and an arrow points to a larger dropdown menu on the right.
- Refraction Carried Out:\*** Radio buttons for "No" and "Yes".
- Prescription\*** Radio buttons for "No Change or No Prescription" and "New or Changed".
- Remote Consultation?** A checkbox.
- Student Optometrist Examination?** Radio buttons for "No" (selected) and "Yes".
- Student GOC Num:** A text field with "SO-" followed by a greyed-out input area.

The dropdown menu on the right, titled "Please Select...", lists the following reason codes:

- 3.0 Additional Appointment, Complex Needs
- 3.1 Paediatric Review (without dilation)
- 3.2 Follow-Up/Repeat Procedures (without dilation, no glaucoma)
- 3.3 Suspect Glaucoma (without dilation)
- 3.5 Anterior Eye Condition (without dilation)
- 3.7 Post-Operative Cataract Examination (without dilation)
- 3.8 Unscheduled Appointment (without dilation)
- 3.9 Cataract Referral Advice and Counselling
- 
- 4.1 Paediatric Review (with dilation)
- 4.2 Follow-Up/Repeat Procedures (with dilation, no glaucoma)
- 4.3 Suspect Glaucoma (with dilation)
- 4.5 Anterior Eye Condition (with dilation)
- 4.6 Cycloplegic Refraction Of A Child
- 4.7 Post-Operative Cataract Examination (with dilation)
- 4.8 Unscheduled Appointment (with dilation)

### Supplementary Examination details

If you are carrying out a Supplementary, then you 'Supplementary Examination' Tab will appear after the Domiciliary Visit tab instead of a Primary. The Supplementary Eye Examination Reason Codes have now been revised. Please read the description of the codes to ensure you make the correct selection.

You can now also indicate that this was a remote consultation.

There has also been the addition of 'Student Optometrist Examination'. If you select "YES" for this, you will need to enter the Student GOC Number.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Prescription

Navigation: Patient Details | Examination Details | Domiciliary Visit | Primary Examination | **Prescription** | Vouchers & Supplements | Declaration | Clai >

Previous Prescription: No Prescription Data Available

New Prescription: R: Sph > Cyl > Axis > L: Sph > Cyl > Axis

Right					Left				
Sph. +/-	Cyl. +/-	Axis	Prism	Base	Sph. +/-	Cyl. +/-	Axis	Prism	Base
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Visual Acuity

RE DVA	<input type="checkbox"/>	LE DVA	<input type="checkbox"/>
RE NVA	<input type="checkbox"/>	LE NVA	<input type="checkbox"/>
Binocular DVA <input type="checkbox"/>			

Buttons: Cancel

Navigation: Patient Details | Examination Details | Domiciliary Visit | Primary Examination | **Prescription** | Vouchers & Supplements | Declaration | Clai >

Previous Prescription: Prescription Date: 01/05/2025. No Visual Acuity Data Available

New Prescription: R: Sph > Cyl > Axis > L: Sph > Cyl > Axis

Right					Left				
Sph. +/-	Cyl. +/-	Axis	Prism	Base	Sph. +/-	Cyl. +/-	Axis	Prism	Base
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Visual Acuity

RE DVA	<input type="checkbox"/>	LE DVA	<input type="checkbox"/>
RE NVA	<input type="checkbox"/>	LE NVA	<input type="checkbox"/>
Binocular DVA <input type="checkbox"/>			

Buttons: Cancel Save Previous Next

### Prescription Information

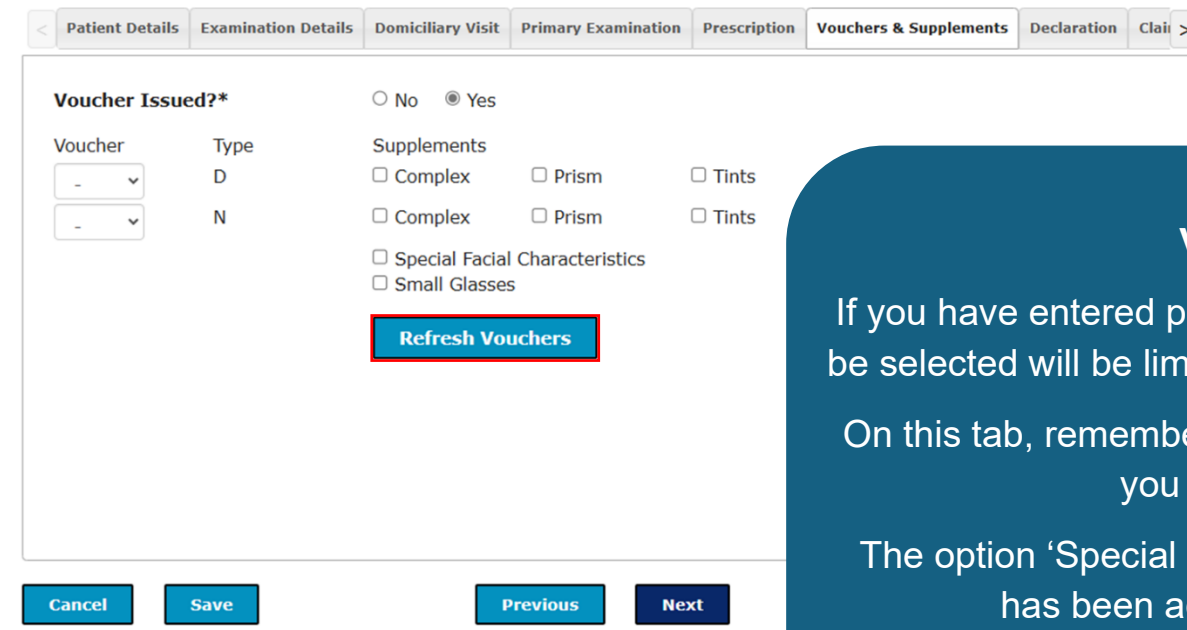
If we hold any prescription information, then this will be available under the 'Prescription tab' as shown on the right. If we do not have any prescription information, the top of the screen will be blank with a message stating "No prescription Data Available".

You can enter the new prescription information, but this is not mandatory.

However, entering this information is beneficial as it will allow you to make the correct voucher selections on the next tab, and also makes the process for creating a GOS3 much simpler.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Vouchers and Supplements



Voucher	Type	Supplements
-	D	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints
-	N	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints

Special Facial Characteristics  
 Small Glasses

**Refresh Vouchers**

### Vouchers and Supplements

If you have entered prescription information, then the vouchers that can be selected will be limited in order to allow to make the correct selection.

On this tab, remember to always click on 'Refresh Vouchers' to ensure you have the most up to date values.

The option 'Special Facial Characteristics' has also been added. This has been added to GOS3 and GOS4 forms as well.

The system now makes it clear which combinations of selections are not possible. For instance, if you select special facial characteristics, you cannot also select small glasses.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

### Declaration

Case ID 29814 / 100953 / 0

## GOS(S)1 APPLICATION FOR AN NHS EYE EXAMINATION

< Primary Examination Supplementary Examination Prescription Vouchers & Supplements **Declaration** Claim Total Claim Summary >

**Patient / patient representative has confirmed the patient is entitled to a NHS Primary and/or Supplementary Eye Examination on the date of the examination because they are:\***

- Ordinarily a resident of the United Kingdom
- Exempt from NHS charges under the NHS (Charges to Overseas Visitors) (Scotland) Regulations 1989, as amended
- Or
- A refugee or asylum seeker

Cancel

Save

Previous

Next

### Declaration

On this tab, you will be able to select the patient's entitlement to NHS Primary or Supplementary Eye Examination.

Please note that 'A refugee or asylum seeker' is now on the list of options.

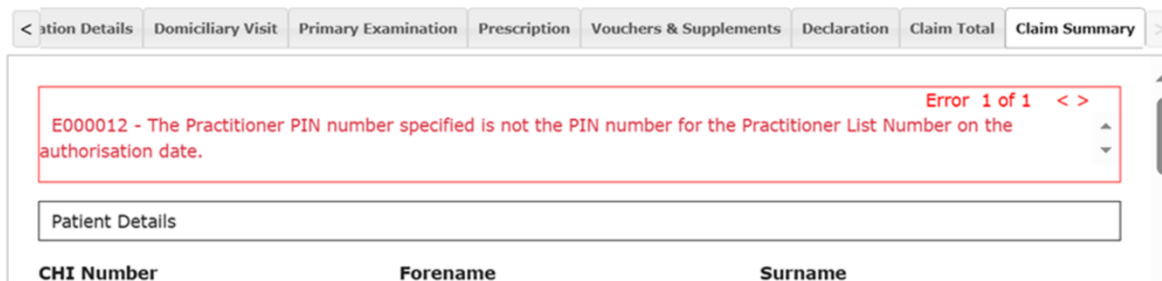
---

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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### Claims Summary - Errors – incomplete or incorrect data



The screenshot shows a navigation bar with tabs: < Navigation Details, Domiciliary Visit, Primary Examination, Prescription, Vouchers & Supplements, Declaration, Claim Total, Claim Summary >. Below the tabs is a red-bordered box containing an error message: "Error 1 of 1 < > E000012 - The Practitioner PIN number specified is not the PIN number for the Practitioner List Number on the authorisation date." Below the error box is a "Patient Details" section with a table header: CHI Number, Forename, Surname.

#### Claim Errors

If you have entered anything incorrectly or have not completed all the mandatory fields, you will receive errors within the claim notifying you of this. Please see an example of this in the image above.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Claim Total

< tion Details Domiciliary Visit Primary Examination Prescription Vouchers & Supplements Declaration **Claim Total** Claim Summary >

Claim Totals

Claim Total	£0.00
-------------	-------

Cancel Save Calculate Previous Next

< tion Details Domiciliary Visit Primary Examination Prescription Vouchers & Supplements Declaration **Claim Total** Claim Summary >

Claim Totals

Primary Examination	£44.74
Claim Total	£44.74

Cancel Save Recalculate Previous Next

### Claim Total

This tab will show you the total value of what you have claimed. Please ensure to click on “Calculate” which will then present the total. If you have gone back into the claim to make changes, please ensure to click “Recalculate”.

---

## General Ophthalmic Services (GOS) Changes

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The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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## Claim Summary

### Patient Details

<b>CHI Number</b>	<b>Forename</b>	<b>Surname</b>
-	Jane	Bloggs
<b>Patient Date of Birth</b>	<b>Sex</b>	<b>Previous Surname</b>
01/01/2001	Female	-
<b>Address</b>	123 Drive	
	City	
	-	
<b>Postcode</b>		
EH12 9EB		

### Core Examination Details

**Reason for Examination** Self-Referral

**Patient Has/Is**  None  A Smoker

**Was this a First Port of Call Presentation** -

**Patient Referred To** -

**Domiciliary Visit** No

### Primary Examination Details

**Primary Eye Examination Fee Type:** Patient aged under 60 whose pupils are dilated

**Examination Date:** 17/07/2025

**Refraction Carried Out:** No

**Is Prescription Changed?** New or Changed

**Date of Previous NHS eye examination**

**Early Eye Examination Reason** -

**Claims Summary**  
The Claims Summary tab will provide a full summary of the claim. This will allow you to see all the details on one page.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## GOS(SS) - GOS Specialist Supplementary

Patient Details | **GOS Specialist Supplementary** | Domiciliary Visit | Declaration | Claim Total | Claim Summary

**Specialist Supplementary Examination Reason Code\***

**Reason for Examination\***

**Examination Date\***

**Remote Consultation?**  **Domiciliary Visit**

**Anterior Eye Condition(s)\***

<input type="checkbox"/> Anterior Uveitis	<input type="checkbox"/> Herpes Simplex Keratitis	<input type="checkbox"/> Marginal Keratitis
<input type="checkbox"/> Blepharitis	<input type="checkbox"/> Ocular Rosacea	<input type="checkbox"/> Ocular Allergy
<input type="checkbox"/> Episcleritis	<input type="checkbox"/> Infective Conjunctivitis	<input type="checkbox"/> Corneal Foreign Body
<input type="checkbox"/> Herpes Zoster Ophthalmicus	<input type="checkbox"/> Other	

**Outcome of Examination\***

- Condition Managed to Full Resolution
- Treatment Initiated and Follow Up Appointment Arranged
- Treatment Continued/Altered and Follow Up Appointment Arranged
- Patient Referred to Hospital Eye Service
- Patient Returned to Referrer
- Patient Referred to GP

**Specialist Supplementary Examination Reason Code\* dropdown menu:**

- Please select..
- 5.0 First Specialist SEE
- 5.1 Second and Subsequent Specialist SEE

**Reason for Examination\* dropdown menu:**

- Please Select...
- Self-Referred
- Referred by another Optometrist
- Recall
- Referred by a General Practitioner
- Referred by another Care Professional

**Buttons:** Cancel Save Previous Next

**GOS-SS**  
When completing a GOS-SS claim, you will enter all the relevant details on this tab, including the reason codes, reason and date of examination, the conditions (you can select one or more); and the outcome of examination (select only one).

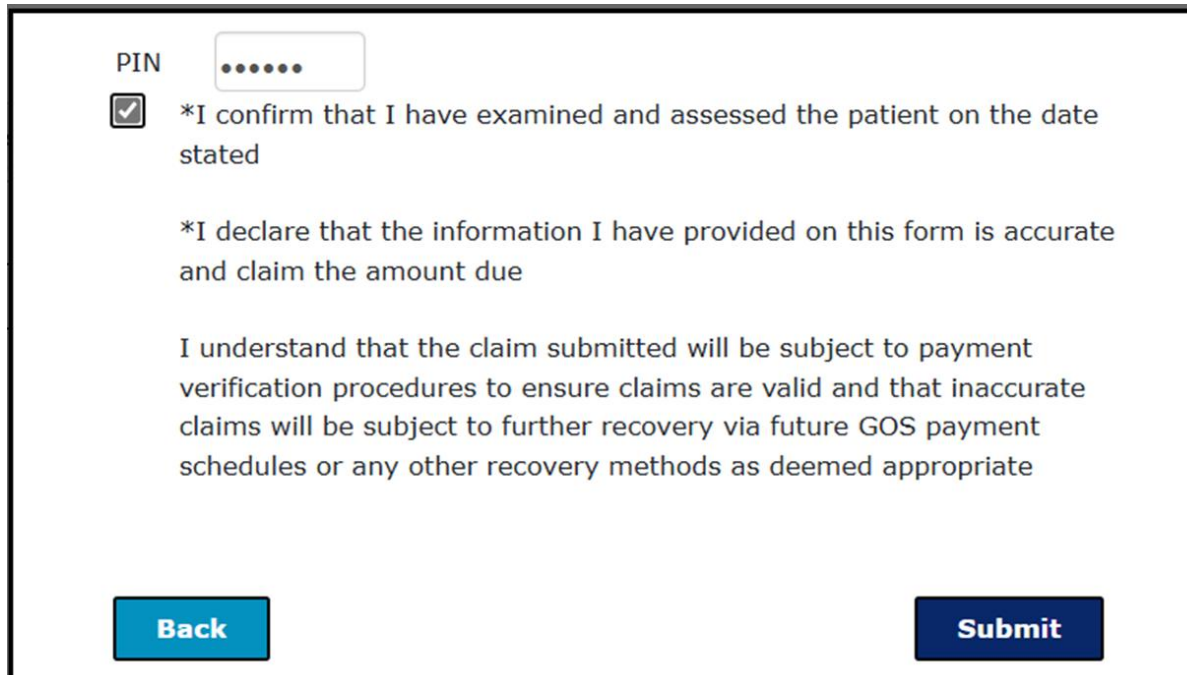
---

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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### PIN Pop-up



The screenshot shows a PIN pop-up form with the following elements:

- A label "PIN" next to a text input field containing six dots.
- A checked checkbox followed by the text: "\*I confirm that I have examined and assessed the patient on the date stated".
- The text: "\*I declare that the information I have provided on this form is accurate and claim the amount due".
- The text: "I understand that the claim submitted will be subject to payment verification procedures to ensure claims are valid and that inaccurate claims will be subject to further recovery via future GOS payment schedules or any other recovery methods as deemed appropriate".
- Two buttons at the bottom: "Back" (light blue) and "Submit" (dark blue).

### PIN pop-up

When you are ready to submit, you will get a pop-up asking you to enter your PIN.

If you are unsure what your PIN is, please contact Practitioner Services: [nss.psdophthalmic@nhs.scot](mailto:nss.psdophthalmic@nhs.scot)

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## GOS – Claims review

### Review Claims

[Back to Home Page](#)

#### Web Payments Submissions

Claim created between  and  Claim type  Status

Name	CHI	Date of birth	Created	Exam	Type	Status	Value	Action	Delete
Patient 1		01/01/2010	27/05/2025	01/05/2025	GOS4	Parked	0.00	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 2		01/01/2010	27/05/2025	01/11/2024	GOS3	Parked	44.09	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 3		01/01/2010	26/05/2025		GOS1	Parked	0.00	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 4		01/01/2010	15/05/2025		SGSup	Parked	0.00	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 5		01/01/2010	14/05/2025		GOS3	Parked	0.00	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 6		01/01/2010	14/05/2025		GOS1	Parked	0.00	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 7		01/01/2010	14/05/2025	01/10/2024	GOS1	Submitted (Error)	10.00	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 8		01/01/2010	14/05/2025	01/11/2024	GOS4	Parked	49.09	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 9		01/01/2010	13/05/2025	01/05/2025	SGSup	Parked	22.00	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 10		01/01/2010	13/05/2025	01/05/2025	GOS1	Parked	44.84	<a href="#">View</a>	<a href="#">Delete</a> <input type="checkbox"/>

### Review Claims

After you have submitted, you will be redirected to the Review Claims page, which shows a list of all the claims you have either submitted or parked.

On the right hand side, you can select multiple claims and bulk delete.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## GOS - Claims Review – Create GOS3

### Review Claims

[← Back to Home Page](#)

#### Web Payments Submissions

Claim created between  and  Claim type  All Status  Submitted (OK)

Name	CHI	Date of birth	Created	Exam	Type	Status	Value	Action	Create GOS3	Delete
Patient 1			10/06/2024	30/08/2019	GOS3	Submitted (OK)	14.60	<a href="#">View</a>		<a href="#">Delete</a> <input type="checkbox"/>
Patient 2			28/09/2020	28/09/2020	GOS1	Submitted (OK)	37.00	<a href="#">View</a>	<a href="#">GOS3</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 3			24/09/2020	24/09/2020	GOS4	Submitted (OK)	116.40	<a href="#">View</a>		<a href="#">Delete</a> <input type="checkbox"/>
Patient 4			22/06/2022	01/05/2022	GOS1	Submitted (OK)	25.24	<a href="#">View</a>	<a href="#">GOS3</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 5			30/10/2024	01/10/2024	GOS1	Submitted (OK)	38.11	<a href="#">View</a>	<a href="#">GOS3</a>	<a href="#">Delete</a> <input type="checkbox"/>
Patient 6			30/10/2024	01/10/2024	GOS3	Submitted (OK)	39.10	<a href="#">View</a>		<a href="#">Delete</a> <input type="checkbox"/>
Patient 7			26/06/2024	22/02/2020	GOS3	Submitted (OK)	14.60	<a href="#">View</a>		<a href="#">Delete</a> <input type="checkbox"/>
Patient 8			12/05/2025	01/05/2025	GOS1	Submitted (OK)	96.71	<a href="#">View</a>	<a href="#">GOS3</a>	<a href="#">Delete</a> <input type="checkbox"/>

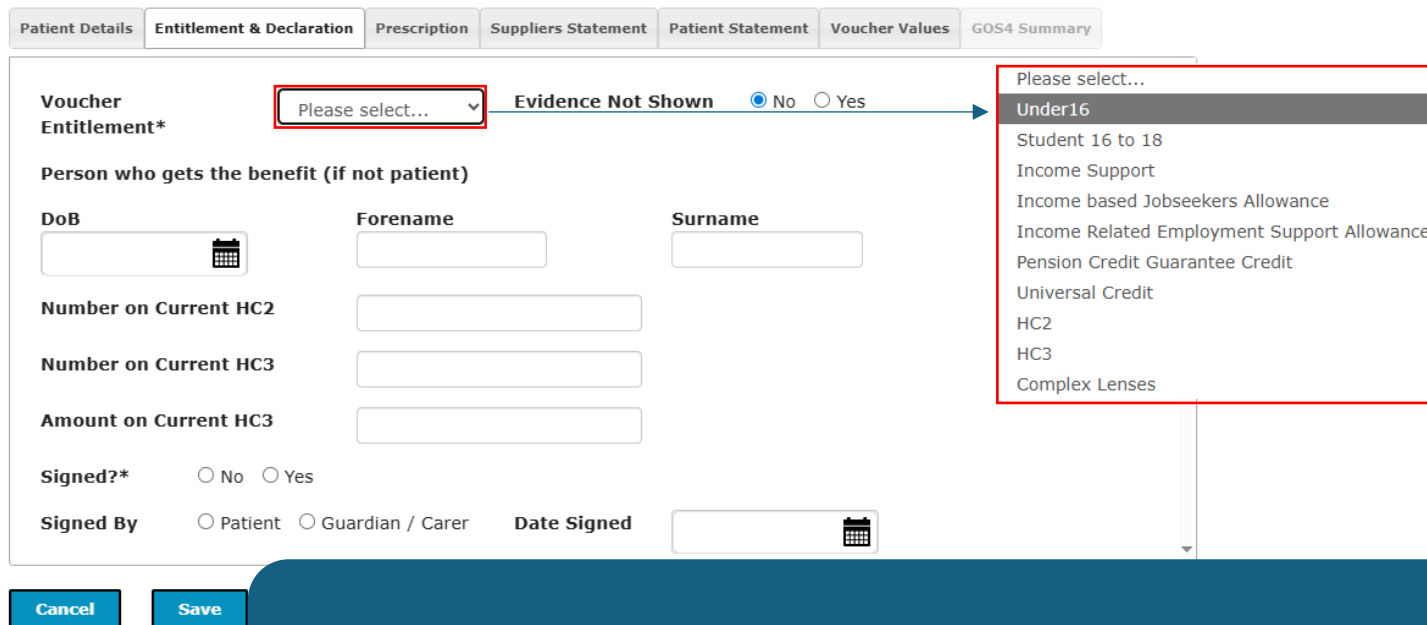
### Review Claims – Create GOS3

You can filter the status of claims by “Submitted OK” which will then show you results of all the claims submitted successfully. This creates an additional column called “Create GOS3” which will allow you to create a GOS3 for GOS1s that have been submitted successfully.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## GOS3 and GOS4

### Entitlement & Declaration



**Voucher Entitlement\*** Please select... Evidence Not Shown  No  Yes

**Person who gets the benefit (if not patient)**

**DoB**  **Forename**  **Surname**

**Number on Current HC2**

**Number on Current HC3**

**Amount on Current HC3**

**Signed?\***  No  Yes

**Signed By**  Patient  Guardian / Carer **Date Signed**

**Entitlement & Declaration**

- Please select...
- Under16
- Student 16 to 18
- Income Support
- Income based Jobseekers Allowance
- Income Related Employment Support Allowance
- Pension Credit Guarantee Credit
- Universal Credit
- HC2
- HC3
- Complex Lenses

**Cancel** **Save**

This tab on both GOS3 and GOS4 will have all the information relating to a patient's voucher entitlement.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Prescription

### GOS(S)3 NHS OPTICAL VOUCHER AND PATIENT'S STATEMENT

Patient Details Entitlement & Declaration **Prescription** Suppliers Statement Patient Statement Voucher Values GOS3 Summary

R: Sph > Cyl > Axis > L: Sph > Cyl > Axis

**Right**

Sph.	Cyl.	Axis	Prism	Base
+/-	+/-			Select. v
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add

**Left**

Sph.	Cyl.	Axis	Prism	Base
+/-	+/-			Select. v
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add

Voucher	Type	Supplements
<input type="text" value="-"/>	D	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints
<input type="text" value="-"/>	N	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints
<input type="checkbox"/> Special Facial Characteristics		
<input type="checkbox"/> Small Glasses		

**Refresh Vouchers**

Examining Practitioner  
**Ophthalmic List Number\***

**Forename\***

**Date of NHS Eye Examination\***

**Date Signed\***

**Practitioner Signature\***

No  Yes

### GOS(S)4 NHS OPTICAL REPAIR/REPLACEMENT VOUCHER APPLICATION FORM

Patient Details Entitlement & Declaration **Prescription** Suppliers Statement Patient Statement Voucher Values GOS4 Summary

**Right**

Sph.	Cyl.	Axis	Prism	Base
+/-	+/-			Select. v
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add

**Left**

Sph.	Cyl.	Axis	Prism	Base
+/-	+/-			Select. v
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add

<b>Voucher</b>	<b>Type</b>	<b>Supplements</b>
<input type="text" value="-"/>	D	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints
<input type="text" value="-"/>	N	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints
<input type="checkbox"/> Special Facial Characteristics		
<input type="checkbox"/> Small Glasses		

**Refresh Vouchers**

## Prescription

Here you will enter the prescription information and relevant details such as list number and name of the examining practitioner. Please click on 'Refresh Vouchers' to show possible voucher values based on the prescription.

The system now makes it clear which combinations of selections are not possible. For instance, if you select 'Special facial characteristics', you cannot also select 'small glasses'.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Suppliers Statement

### GOS(S)3 NHS OPTICAL VOUCHER AND PATIENT'S STATEMENT

Patient Details Entitlement & Declaration Prescription **Suppliers Statement** Patient Statement Voucher Values GOS3 Summary

**Supplied\***

**Reason for Issue\***

**Date First(Only) Supplied\***

**Date Second Supplied**

Glasses  
Contact Lenses  
Both

New Prescription  
Prescription Change  
Glasses Unserviceable

### GOS(S)4 NHS OPTICAL REPAIR/REPLACEMENT VOUCHER APPLICATION FORM

Patient Details Entitlement & Declaration Prescription **Suppliers Statement** Patient Statement Voucher Values GOS4 Summary

**The glasses / contact lenses have been:\***  Repaired  Replaced

**The following have been Repaired or Replaced:**

**Parts:\* Lens**

**Frame**

Right  
Left  
Both

Front  
Side  
Whole

Cancel Save

**Supplier's statement**

On this tab, the Supplier will select what was supplied and the reason for issue on a GOS3. They will also enter the date first supplied (this may be the only date).

On a GOS4, the Supplier will indicate whether appliances have been repaired or replaced, and what parts were repaired or replaced.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

### Patient Statement

## GOS(S)3 NHS OPTICAL VOUCHER AND PATIENT'S STATEMENT

Patient Details Entitlement & Declaration Prescription Suppliers Statement **Patient Statement** Voucher Values GOS3 Summary

**Patient Received\*** Please select.. **On\***

**Signed?\***  No  Yes **By**  Patient  Guardian / Carer

**Name** (If not Patient) **Forename**  **Surname**

**Address** (If Different from Patient)

**Postcode**

**Please select..**

- 1 pair of glasses
- 2 pairs of glasses
- 1 pair of glasses and 1 pair of contact lenses
- 1 pair of contact lenses
- 2 pairs of contact lenses

## GOS(S)4 NHS OPTICAL REPAIR/REPLACEMENT VOUCHER APPLICATION FORM

Patient Details Entitlement & Declaration Prescription Suppliers Statement **Patient Statement** Voucher Values GOS4 Summary

**Confirmation Glasses / Contact Lenses have been\***  Repaired  Replaced

**Date Received\***

**Signed\***  No  Yes **By\***  Patient  Guardian / Carer

**Name** (If not Patient) **Forename**  **Surname**

**Address** (If Different from Patient)

**Postcode**

### Patient Statement

On a GOS 3, this tab will allow you to select what the patient received.  
On a GOS4, you can select whether the appliances were replaced or repaired.  
For both forms, you will need to complete the patient signature details.

**A signature by the patient or Guardian/Carer is required.**

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Voucher Values

### GOS(S)3 NHS OPTICAL VOUCHER AND PATIENT'S STATEMENT

Patient Details	Entitlement & Declaration	Prescription	Suppliers Statement	Patient Statement	Voucher Values	GOS3 Summary
Vouchers Value(s):		£0.00	£0.00			
Complex:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00			
Prism:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00			
Tint:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00			
S Glasses:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00			
SFC:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00			
Total of Vouchers & Supplements:		£0.00	£0.00			
OR Actual Cost (If less / equal to vouchers):		<input type="text"/>	<input type="text"/>			
Maximum Claimable:		£0.00				
Patient's Contribution:		£0.00				
Total Claim:		£0.00				

### GOS(S)4 NHS OPTICAL REPAIR/REPLACEMENT VOUCHER APPLICATION FORM

Patient Details	Entitlement & Declaration	Prescription	Suppliers Statement	Patient Statement	Voucher Values	GOS4 Summary
Voucher Value Appropriate to Prescription:		£0.00				
Parts	Lens: -	£0.00				
	Frame: -	£0.00				
Complex:	<input type="checkbox"/>	£0.00				
Prism:	<input type="checkbox"/>	£0.00				
Tint:	<input type="checkbox"/>	£0.00				
S Glasses:	<input type="checkbox"/>	£0.00				
SFC:	<input type="checkbox"/>	£0.00				
Total of Vouchers & Supplements:		£0.00				
OR Part(s) per Current PCA(O) plus any supplements:		£0.00				
OR Actual Cost (If less / equal to vouchers):		£	<input type="text"/>			
Maximum Claimable:		£0.00				
Patient's Contribution:		£0.00				
Total Claim:		£0.00				

Cancel

Save

Calculate

Previous

Cancel

Save

Calculate

Previous

### Voucher Values

On this tab, you will be able to make voucher selections (S Glasses = Small Glasses; SFC = Special Facial Characteristics).

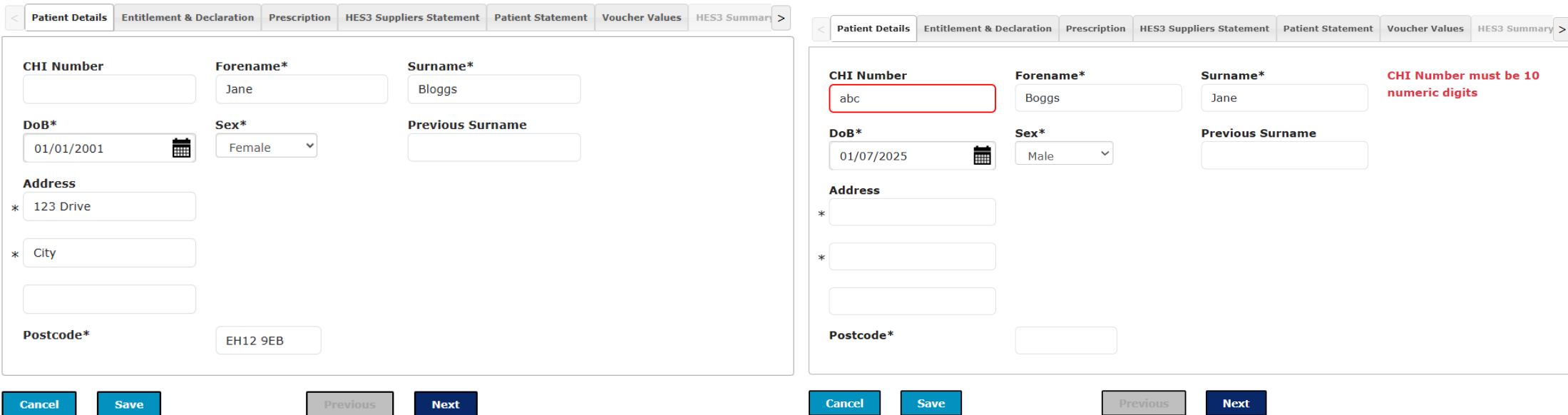
Some options may be greyed out or unavailable, depending on the details you have entered previously.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## HES 3

### Patient Details



The form consists of several sections: CHI Number, Forename\*, Surname\*, DoB\*, Sex\*, Previous Surname, Address, and Postcode\*. The CHI Number field is highlighted in red in the second screenshot, indicating an error. The error message 'CHI Number must be 10 numeric digits' is displayed in red text next to the field.

### Patient Details

You will complete the Patient Details on a HES3 the way you would for a GOS1, GOS3, GOS4 and GOS(SS).

Any invalid data will be flagged with an error message.

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## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

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**Public Services Delivery  
Scotland**



## Entitlement & Declaration

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

< Patient Details **Entitlement & Declaration** Prescription HES3 Suppliers Statement Patient Statement Voucher Values HES3 Summary >

**Voucher Entitlement\*** Please select... **Evidence Not Shown**  No  Yes

**Person who gets the benefit (If not patient)**

**DoB**  **Forename**  **Surname**

**Number on Current HC2**

**Number on Current HC3**

**Amount on Current HC3**

**Signed?\***  No  Yes

**Signed By**  Patient  Guardian / Carer **Date Signed**

Please select...  
Under16  
Student 16 to 18  
Income Support  
Income based Jobseekers Allowance  
Income Related Employment Support Allowance  
Pension Credit Guarantee Credit  
Universal Credit  
HC2  
HC3  
Complex Lenses

**Cancel** **Save** **Previous** **Next**

### Entitlement and Declaration

This tab on both GOS3 and GOS4 will have all the information relating to a patient's voucher entitlement.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

### Prescription

< Patient Details Entitlement & Declaration **Prescription** HES3 Suppliers Statement Patient Statement Voucher Values HES3

Right						Left					
Sph.	Cyl.	Axis	Prism	Base		Sph.	Cyl.	Axis	Prism	Base	
+/-	+/-					+/-	+/-				
-	2.5	-	0.75	173	Select	-	3.00	-	1.00	004	Select
					Select						Select

Add

Voucher	Type	Supplements
-	D	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints
-	N	<input type="checkbox"/> Complex <input type="checkbox"/> Prism <input type="checkbox"/> Tints
		<input type="checkbox"/> Special Facial Characteristics <input type="checkbox"/> Small Glasses

Examining Practitioner  
**Forename\***  **Surname\***

**Date of NHS Eye Examination\***

**Date Signed\***

**Practitioner Signature\***  No  Yes

**Prescription**

Here you will enter the prescription information and relevant details such as list number and name of the examining practitioner. Please click on 'Refresh Vouchers' to show possible voucher values based on the prescription.

The system now makes it clear which combinations of selections are not possible. For instance, if you select 'Special facial characteristics', you cannot also select 'small glasses'.

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

### Suppliers Statement

< Patient Details Entitlement & Declaration Prescription **HES3 Suppliers Statement** Patient Statement Voucher Values HES3 Summary >

**Supplied\***

**Reason for Issue\***

**Date First(Only) Supplied\***

**Date Second Supplied**

**Supplied\*** dropdown menu:

- Please select..
- Glasses
- Contact Lenses
- Both

**Reason for Issue\*** dropdown menu:

- Please select..
- New Prescription
- Prescription Change
- Glasses Unserviceable

Buttons: Cancel Save


**Supplier's statement**

On this tab, the Supplier will select what was supplied and the reason for issue. They will also enter the date first supplied (this may be the only date).

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

## Patient Statement

< Patient Details Entitlement & Declaration Prescription HES3 Suppliers Statement **Patient Statement** Voucher Values HES3 Summary >

**Patient Received\*** Please select.. **On\***  

**Signed?\***  No  Yes **By**  Patient  Guardian / Carer

**Name** (If not Patient) **Forename**  **Surname**

**Address** (If Different from Patient)

**Postcode**

Please select..  
1 pair of glasses  
2 pairs of glasses  
1 pair of glasses and 1 pair of contact lenses  
1 pair of contact lenses  
2 pairs of contact lenses

Cancel Save **Previous** **Next**

### Patient Statement

On this tab you will select what the patient received.  
You will also need to complete the patient signature details.

## General Ophthalmic Services (GOS) Changes

The layout for this guidance is based on screenshots from a test environment, and there may be cosmetic differences when viewing the web form.

<	Patient Details	Entitlement & Declaration	Prescription	HES3 Suppliers Statement	Patient Statement	Voucher Values	HES3 Summary	>
Vouchers Value(s):		£0.00	£0.00					
Complex:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00					
Prism:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00					
Tint:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00					
S Glasses:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00					
SFC:	<input type="checkbox"/> 1st Pair <input type="checkbox"/> 2nd Pair	£0.00	£0.00					
Total of Vouchers & Supplements:		£0.00	£0.00					
OR Actual Cost (If less / equal to vouchers):		<input type="text"/>	<input type="text"/>					
Maximum Claimable:			£0.00					
Patient's Contribution:			£0.00					
Total Claim:			£0.00					

Cancel

### Voucher Values

On this tab, you will be able to make voucher selections (S Glasses = Small Glasses; SFC = Special Facial Characteristics).

Some options may be greyed out or unavailable, depending on the details you have entered previously.