| Surgical Procedure | Indications | |
|--|--|--|
| Oculoplastic/Orbit* | | |
| Oculopiastic/Of bit | Intraocular malignancy | |
| Brachytherapy | Cight thurstoning and litima | |
| Cantholysis/ Canthotomy | Sight-threatening conditions | |
| | Sight-threatening congenital ptosis | |
| Frontalis sling | Dacryocystocele | |
| Probing of nasolacrimal duct | Daciyocystocete | |
| - | Neonate with obstructive respiratory compromise | |
| Decompression of dacryocele** | Orbital tumour with risk of vision loss | |
| Decompression of orbit | Orbital tullion with risk of vision loss | |
| | Orbital cellulitis | |
| Drainage of abscess | Acute chemical injury, or acute Stevens Johnson Syndrome | |
| Reconstruction of ocular surface or | State of the state of th | |
| other tectonic procedures | Canaliculus injury or trauma | |
| Repair of canalicular laceration | Cananeurus injury or trauma | |
| _ | Lacerations of eyelid or face | |
| Repair of eyelid/face | Impending corneal compromise | |
| Tarsorrhaphy | impending cornear compromise | |
| | Ocular trauma, infection, intractable glaucoma, globe perforation, intractable | |
| Enucleation | pain, or intraocular malignancy Sight-threatening infection or intractable pain | |
| Evisceration | 1 | |
| E district of the second | Malignancy or sight-threatening tumour | |
| Excision of tumours | Life-threatening infection | |
| Exenteration | | |
| Exploration of orbit | Life-threatening or sight-threatening conditions | |
| Exploration of orbit | Suspected malignancy or immediate sight-threatening condition | |
| Biopsy of orbit | Consider the state of the state | |
| Biopsy of temporal artery | Suspected giant cell arteritis | |
| 2.opsy or comported the terry | | |
| Cataract | Congenital enterport with risk of amblyonic monocular nations with | |
| Cataract surgery | Congenital cataract with risk of amblyopia, monocular patients with documented vision loss precluding driving, reading or self-care, lens-induced glaucoma, angle-closure glaucoma, acute lens complications, or severe | |
| | anisometropia of fellow eye post recent lens extraction in first eye | |
| Cornea | | |
| | Paediatric patients with corneal blindness in both eyes in their amblyopic period | |
| Transplantation | Lacerations, blunt rupture, or deeply embedded corneal foreign body | |
| Repair of anterior segment or cornea | | |
| Donain of nonfonotion on impossible | Corneal and scleral injury or trauma | |
| Repair of perforation or impending perforation of cornea or sclera | | |
| | Wound dehiscence or other wounds, including dislocated LASIK flaps | |
| Repair of dehiscence of corneal graft | | |

| or other anterior segment wound | | |
|---|---|--|
| of other anterior segment would | Complications with implanted devices in their cornea or anterior segment | |
| Repair of extrusion or complication of keratoprosthesis | | |
| Washout of the anterior chamber | Sight-threatening hyphema | |
| Neurophthalmology | | |
| i car opiniamozogy | Progressive vision loss | |
| Fenestration of optic nerve sheath | | |
| Glaucoma | | |
| Giaucoma | Uncontrolled intraocular pressure that is sight-threatening | |
| Trabeculectomy | | |
| Goniotomy ab externo or ab interno | Uncontrolled intraocular pressure that is sight-threatening | |
| Gomotomy an externo or an interno | Catastrophic or rapidly progressive glaucoma | |
| Insertion of drainage implant with or without graft | Communication of the property | |
| | Sight-threatening hypotony due to trauma | |
| Closure of cyclodialysis cleft | Endophthalmitis, corneal touch, corneal decompensation, or exposed plate | |
| Removal of aqueous drainage implant | Endophinaminus, comean touch, comean decompensation, or exposed plate | |
| Revision of drainage implant with or without graft | Implant/tube exposure that might be sight threatening, endophthalmitis, malpositioned tube endangering eye or excessive inflammation, a tube that might worsen vision due to corneal oedema or iritis or cystoid macular oedema, or with a severe tube malposition causing rapid visual loss | |
| | Bleb leaks, wound leaks, overfiltration, underfiltration, bleb scarring, sight- threatening hypotony, or shallow anterior chamber | |
| Repair of operative wound(s) | Lens-induced glaucoma or angle-closure glaucoma | |
| Synechiolysis | Lens induced gradeonia of diffic closure gradeonia | |
| Trabeculotomy | Uncontrolled intraocular pressure that is sight-threatening | |
| Tuonggalanal avalankataaaagulatian | Uncontrolled glaucoma or absolute glaucoma with a blind and painful eye | |
| Transscleral cyclophotocoagulation | | |
| Vitreoretinal Surgery | | |
| | Acute lens complications | |
| Pars plana lensectomy | Proliferative diabetic retinopathy, proliferative vitreoretinopathy, complex | |
| Peeling of epiretinal membrane/internal limiting membrane | preretinal membrane, complex macular pathology, or macular hole | |
| Progratic retinancy | Retinal detachment | |
| Pneumatic retinopexy | Retinal detachment, retinal tear, or ocular trauma | |
| Laser indirect retinopexy – complex | | |
| Removal of intraocular foreign body | Presumed intraocular foreign body | |
| Drainage of choroidals | Appositional choroidal effusion, suprachoroidal haemorrhage, or flat anterior chamber | |
| Detuckalkan ini asti | Pain due to ocular diseases causing significant compromise of quality of life | |
| Retrobulbar injection | Retinal detachment, ocular trauma, intraocular infection, vitreous | |
| Scleral buckle | haemorrhage, retinal tear, or intraocular foreign body | |
| Vitrectomy | Retinal detachment, ocular trauma, intraocular infection, vitreous haemorrhage, retinal tear, intraocular foreign body, misdirected aqueous, ciliary block glaucoma, malignant glaucoma, a vitreous prolapse, or a tube shunt that blocks filtration | |
| Strabismus/ Paediatrics | | |

| | Torn or lost extraocular muscle |
|-------------------------------|---|
| Strabismus surgery | |
| | Paediatric patients with retinopathy of prematurity (if this can't be in NICU) |
| Laser photocoagulation | |
| Examination under anaesthesia | Paediatric patients with retinoblastoma, endophthalmitis, Coats Disease, uveitis, glaucoma, ocular trauma, retinal detachment, or presumed intraocular foreign body |

Supplemental data 1 – Urgent Ophthalmological procedures – adapted from American Academy of Ophthalmology, and Royal Australian and New Zealand College of Ophthalmologists.

- * Due to the high risk of COVID-19 infection from the nasopharynx, all nasal syringing, lacrimal surgery and nasal endoscopy should be avoided.
- ** Dacryocystocele (paediatric CNLDO with nasal involvement not resolving/acutely infected) should be treated medically first. If requires surgery, prefer percutaneous drainage, avoid DCR due to COVID-19 risk.