JUVENILE COURT HEALTH SERVICES OPTOMETRY PROCEDURE

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Subject:		Original	Original		Procedure #	
		Issue Date:	12/31/07	001		
BASIC EYE EXAMINATION		Supersedes:		Effective Date:		
			5/31/11	11	/9/14	
Departments Consulted:	Approved By:		Approved b	y:		
	(Signature on File) Optometrist		(Signature on	(Signature on File)		
	(Signature on File) Medical Director			Health Services Administrator		

PURPOSE

To ensure that required pretesting is performed prior to the youth being seen by the Optometrist.

PROCEDURE:

Intake by the optometry nurse is recorded using the Probation Electronic Medical Records System (PEMRS). The days schedule is reviewed by the nurse, and the minor's name is noted as "checked in" on PEMRS. The following procedures are then recorded on the PEMRS Optometry Examination Form.

The Basic Eye Examination: Initial Testing

After performing the case history as part of a basic eye examination, the optometry nurse will perform the following tests prior to examination by the optometrist:

1) Auto-refraction

The auto-refractor is used to determine an objective measurement of the patient's refractive status. After aligning the patient's head and eyes, this automated instrument will gather consecutive measurements of the refractive status of the eye. It is suggested that at least three measurements be made for each eye. Note that certain conditions affecting the optical quality of the eye will not allow use of this instrument. The paper read out will give average measurements of refractive error for each eye. This measurement is then recorded in the appropriate space on the PEMRS form.

2) Visual Acuity

A visual acuity measurement for each eye is taken using the Optec Vision Tester. The measurement of visual acuity is to be taken with the minor's correction, if available. The minor is asked to press his forehead against the rest at the top of the instrument. This will cause the visual acuity screen to be illuminated. The remote control available to the optometry nurse allows each eye to be measured independently. A copy of the acuity screen is available for the nurse to confirm correct responses. This is noted in PEMRS.

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3) Automated Tonometry

The non-contact tonometer (NCT) will be used to measure the intraocular pressure of each eye. After aligning the patient's head on the chin rest, the operator should have the patient close their eyes as the instrument is moved as close as possible to the right eyelid. At this point, the "limiter" is to be set to the "on" position. This step ensures that the instrument does not touch the eye as it automatically aligns. The next step is to focus the solid white circle on the cornea, as seen on the monitor, and then to press the blue button labeled "start". At that point the instrument will automatically align. If the instrument cannot get close enough to the eye, it will ask that the operator to "reset limiter", meaning that the head should be rechecked for an appropriate position, and the limiter reset. After pressing the start button, the instrument will realign. If correctly in position, the instrument will discharge a puff of air, and a measurement will be taken. The instrument automatically will move to the left eye, where it will find the eye and take a measurement.

The measurements will be recorded on the electronic examination form in PEMRS. The initials "NCT" should be indicated as the method that was used to take the measurement. If there is a difference greater than 4mm between the eyes, or if an individual measurement is above 21mm, the readings should be repeated.

4) Color Screening

The booklet entitled <u>Ishihara's Tests for Colour Deficiency</u> will be used to screen for abnormal color vision. The minor will be first shown plate #1, which is a test plate designed to demonstrate the basic concept of the test, that a number is embedded within the colored dots of the plate. Failure to see this number is indicative of either severe vision loss, cognitive dysfunction, or of a non-cooperative patient. Whatever the cause, failure to see the test plate figure should be written on the examination form, and the test terminated. Otherwise, The patient should be guided through the eleven test plates with numbers. If all are answered correctly, WNL should be highlighted on the PEMRS form. If not, the number of correctly answered plates should be indicated as a fraction (i.e. 10/11) in the area labeled "Other" next to "Color Vision" on the PEMRS optometry examination form.

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5) Stereopsis

The booklet entitled <u>Stereo Fly Test</u> will be used to test for normal binocular function of the eyes. After placing the polarized eyeglasses on the patient, the picture of the fly is presented. The patient should be asked if the fly can be seen sitting "above the page". To verify that this request is understood, the patient should be asked to "pinch the wings". If the patient correctly grasps above the plane of the photograph, gross Stereopsis is present. At this point the stereotest animals can be used to determine graded stereoscopic acuity between 100 to 400 seconds of arc. The appropriate limit should be indicated on the examination form in PEMRS next to the area labeled "Stereo" on the exam form. If no stereopsis is present, the word "none" should be highlighted.

REFERENCE

JCHS Policy # C-501, "Vision Services"