Specification for Ophthalmic Reports

The following sub-headings are for guidance purposes only and should not be taken as an exhaustive list.

1. Diagnosis (or diagnoses)

2. History
   - Presenting symptoms
   - Past ocular history
   - Past medical history
   - Family history

3. Examination and Investigation findings
   - Clinical findings
     - Uncorrected visual acuities (Right, Left, Both) - distant (6m), intermediate (1m) and near (30-50cm)
     - Corrected visual acuities (Right, Left, Both) - distant (6m), intermediate (1m) and near (30-50cm)
     - Current refraction
     - General, Face, Adnexal structures e.g. eyelids
     - Pupils
     - Cover test
     - Eye movements
     - Convergence and accommodation
     - Stereopsis and fusion
     - Field of binocular single vision
     - Hess test
     - Where relevant, full orthoptic report
     - Visual fields
       - For monitoring glaucoma, central static fields ideally Humphrey 24-2.
       - For monitoring neuro-ophthalmological conditions, Humphrey peripheral or neurological programmes, or Goldmann kinetic perimetry
       - For function, monocular and binocular Esterman programme on Humphrey machine.
   - Results of investigations such as CT or MRI scanning
   - Results of blood tests
   - Results of any other relevant tests

4. Treatment, including surgery
   - A. Ocular and other current and recent past medications (name, dose, start and finish dates, frequency)
   - B. Surgery
     - Date of surgery
     - Make and model of any implant
• Post op medication
• Post op result (e.g. refraction, eye position) measured at least twice separated by one month to establish early stability

5. Follow up and prognosis
   ➢ Anticipated follow up/frequency of clinical reviews and investigations
   ➢ Anticipated stability at 1, 5, 10 years

6. Clinical implications
   ➢ Effect on function
   ➢ Any concerns regarding disease progression, treatment compliance, sudden change in vision or risk of incapacity.

Information for specific conditions:

Ocular Hypertension, Glaucoma and Pigment Dispersion Syndrome
• Visual fields
• Optic disc assessment
• Intra ocular pressures
• Anterior angle assessment

Keratoconus
• Specify treatment (spectacles, contact lens supervision, cross linking, corneal transplant)
• Corneal topographies (colour copy)

Vascular Conditions (BRVO, AION, CRVO, BRAO, CRAO, Amaurosis Fugax)
• Esterman visual fields – right, left and binocular field results required
• Intra ocular pressures
• Cardiovascular Review (refer to Coronary Artery Disease Flow chart) to incl
  o FBC, ESR, Thrombophilia screen (where relevant)
  o Temporal artery biopsy, carotid doppler, echocardiogram

Phorias and Tropias
• Orthoptic Report Required
Eye Surgery Reports (from ophthalmic surgeon who carried out surgery)

- Date of surgery
- Intra operative or post-operative complications
- Comment on relevant clinical findings
  - Ocular discomfort or diplopia
  - Corneal haze or other median opacities
  - Symptoms of glare, photophobia or other dysphotopic symptoms
  - Night vision issues

- Cataract Surgery
  - Type of surgery (phacoemulsification or extracapsular)
  - Post capsular thickening and YAG laser treatment (if applicable)
  - Type of intraocular lens implant used
    - Mesopic Contrast Sensitivity
    - Glare sensitivity
    - Halos

- Refractive Surgery and Collagen Cross Linking
  - Type of surgery (LASIK, LASEK, PRK, Collagen Cross Linking, other)
  - Post-operative refractions
  - Glare sensitivity
  - Corneal topographies (Collagen Cross Linking)
  - Mesopic Contrast Sensitivity

- Retinal Detachment/Par Planus Vitrectomy – Laser Retinopexy
  - Type of surgery (gas or silicone oil)
  - Residual field defect
  - Risk of recurrence

Follow-up reports, to include visual field test results are required for many eye conditions in order to maintain medical certification in the aviation environment.