

Instructions for completion of the Ophthalmology Examination Report Form

DADL ATTEST 03.12.01.01

Writing must be in **Block Capitals** using a **ball-point pen** and be **legible**. Exert sufficient pressure to make legible copies. Completion of this form by typing or printing is both acceptable and preferable. If more space is required to answer questions, use a plain sheet of paper bearing the applicant's name, the information, your signature and the date signed. The following numbered instructions apply to the numbered headings on the Ophthalmology Examination Report Form.

NOTICE – Failure to complete the medical examination report form in full as required or to write legibly may result in non-acceptance of the application in total and may lead to withdrawal of any medical certificate issued. The making of False or Misleading statements or the withholding of relevant information by an authorised examiner may result in criminal prosecution, denial of an application or withdrawal of any medical certificate granted.

GENERAL – The AME or Ophthalmology specialist performing the examination should verify the identity of the applicant. The applicant should then be requested to complete the sections 1, 2, 3 4, 5, 6, 7, 12 and 13 on the form and then sign and date the **consent to release of medical information** (section 401) with the examiner countersigning as witness.

302 EXAMINATION CATEGORY

Tick appropriate box:

- Initial – Initial examination for either Class 1 or 2; also initial exam. for upgrading from Class 2 to 1 (notate "upgrading" in Section 303).
- Extended Renewal/revalidation – subsequent ROUTINE comprehensive Ophthalmologic examinations.
- Special Referral – NON Routine examination for assessment of an ophthalmologic symptom or finding.

303 OPHTHALMOLOGY HISTORY – Detail here any history of note or reasons for special referral.

CLINICAL EXAMINATION – SECTIONS 304-309

INCLUSIVE – These sections together cover the general clinical examination and each of the sections must be checked as Normal or Abnormal. Enter any abnormal findings in Section 321.

310 CONVERGENCE – Enter near point of convergence in cm as measured using RAF Near Point Rule or equivalent. Please also tick whether Normal or Abnormal and enter abnormal findings and comments in Section 321.

311 ACCOMMODATION – Enter measurement recorded in Dioptres using RAF Near Point Rule or equivalent. Please also tick whether Normal or Abnormal and enter abnormal findings and comments in Section 321.

312 OCULAR MUSCLE BALANCE – Ocular Muscle Balance is tested at Distant 5 or 6 m and Near at 30-50 cm and results recorded. Presence of Tropia or Phoria must be entered accordingly and also whether Fusional Reserve Testing was NOT performed and if performed whether normal or not.

313 COLOUR PERCEPTION – Enter type of Pseudo-Isochromatic Plates (Ishihara) as well as number of plates presented with number of errors made by examinee. State whether Advanced Colour Perception Testing is indicated and what methods used (which colour Lantern or Anomaloscopy) and finally whether judged to be Colour Safe or Unsafe. Advanced Colour Perception Testing is usually only required for initial assessment unless indicated by change in applicant's colour perception.

314-316 VISUAL ACUITY TESTING AT 5/6 m, 1m and 30-50 cm – Record actual visual acuity obtained in appropriate boxes. If correction not worn nor required, put line through corrected vision boxes. distant visual acuity to be tested at either 5 or 6 metres with the appropriate chart for that distance.

317 REFRACTION – Record results of refraction. Indicate also whether for Class 2 applicants, refraction details are based upon spectacle prescription.

319 CONTACT LENSES – Tick appropriate box signifying if contact lenses are or are not worn. If worn, state type from the following list: hard, soft, gas-permeable, disposable.

320 INTRA-OCULAR PRESSURE – Enter Intra-Ocular Pressure recorded for right and left eyes and indicate whether normal or not. Also indicated method used – applanation, air etc.

321 OPHTHALMOLOGY REMARKS AND RECOMMENDATIONS – Enter here all remarks, abnormal findings and assessment results. Also enter any limitations recommended. If there is any doubt about findings or recommendations the examiner may contact the AMS for advice before finalising the report form.

322 OPHTHALMOLOGY EXAMINER'S DETAILS – In this section the Ophthalmology examiner must sign the declaration, complete his name and address in block capitals, connect telephone number (and fax if available) and lastly stamp the report with his designated stamp incorporating his AME or specialist number.

323 PLACE AND DATE – Enter the place (town or city) and the date of examination. The date of examination is the clinical examination and not the date of finalisation of the form. If the Ophthalmology examination report is finalised on a different date, enter date of finalisation in Section 321 as "Report finalised on".