



Texas School for the Blind and Visually Impaired

Instructional Resources Library

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Interpreting Eye Reports

Sample Format for Eye Report

- I. History/Background Information
 - A. Patient ID, demographic information
 - B. Reason for Referral or Visit
 - Disturbance in vision
 - Pain/discomfort
 - Abnormal eye secretion
 - C. History of Present Illness
 - When were symptoms first noted?
 - Was the onset abrupt or gradual?
 - Have symptoms become worse/better/same over time?
 - Precipitating factors?
 - Associated signs and symptoms?
 - D. Past Ocular History
 - Patient ocular history
 - Parent description of functional vision
 - Any significant family ocular history
 - E. Eye Medications
 - F. Past Medical History
 - Patient medical and developmental history
 - Pregnancy of mother and delivery
 - Pertinent family medical history
 - G. Medications
 - H. Allergies
- II. Eye Examination
 - A. Visual Acuity
 - OD (right eye)
 - OS (left eye)
 - OU (both eyes)
 - B. External
 - Facial asymmetry
 - Exophthalmos (protruding)
 - Enophthalmos (sunken in)
 - Eyelids
 - C. Motility
 - Orthophoria/tropia (straight)

- Exophoria/tropia (turned out)
 - Esophoria/tropia (turned in)
 - Ductions/versions (movement of eyes)
- D. Pupils
- PERRLA (Pupils equally round reactive to light and accommodation)
 - +/- MG(APD) (Marcus Gunn Afferent Pupillary Defect)
- E. Visual Fields
- VF (confrontation) – full OU
- F. Tonometry (Intraocular Pressure)
- G. Examination of Structures of the Eye
- Lids
 - Lashes
 - Conjunctiva
 - Sclera
 - Cornea
 - Tear film
 - Anterior chamber
 - Iris
 - Lens
- H. Fundus
- Disc
 - Optic nerve
 - Macula
 - Vessels
 - Periphery
 - Cup-to-disc ratio (status of optic nerve)
 - OD (right eye)
 - OS (left eye)
- I. Prescription for Corrective Lenses
- OD (right eye)
 - OS (left eye)

III. Assessment/Implications/Plan/Follow Up

Interpreting Prescriptions for Conventional Refractive Errors

	Sphere	Cyl	Axis
O.D.(right eye)	+2.50	-1.25	155
O.S. (left eye)	+1.00		

The table above is a typical format for prescriptions for corrective lenses.

Numbers in the “Sphere” column represent the power in diopters of the spherical lens needed to correct a person’s sight. People who are myopic (nearsighted) need minus lenses (e.g., -1.00 or -2.00). The lenses change in increments of 0.25. People who are hyperopic (farsighted) need plus lenses (e.g., +2.50 or +5.00). These lenses also change in increments of 0.25.

A cylindrical lens (“Cyl” column) corrects astigmatism. Astigmatism is caused by an irregularly shaped (nonspherical) cornea and can be corrected with eyeglasses or contact lenses.

The “Axis” column designates the sphere of the lens and identifies the position of astigmatism.

Ophthalmic Abbreviations

a	Before
ac	Before meals
ACL	Anterior Chamber Lens
ACT	Alternate Cover Test
ARMD/AMD	Age-Related Macular Degeneration
B	Bilateral
b.i.d.	Twice per day
BS	Blind Spot
BVA	Best-Corrected Visual Acuity
Bx	Biopsy
c	With
cc	With correction
cat	cataract
CA	Cancer
CE	Cataract Extraction
CF	Counts Fingers
CL	Contact Lens
CNS	Central Nervous System
CSM	Central, Steady and Maintained Fixation
CSUM	Centra, Steady and UnMaintained Fixation
CV	Color Vision
CVF	Central Vision Field
d	Day
D	Diopter
D	distance, distance vision
DC	discontinue
Dx	diagnosis
Dz	Disease
e.g.	for example
ENUC	enucleated
EUA	Exam Under Anesthesia
FC	Finger Counting
F+F	Fix and Follow Vision
FH	Family History
FP	Fixation Preference
FTG	Full-Time Glasses
FTO	Full-Time Occlusion
FTP	Full-Time Patch
f/u	follow-up

GL	eyeglasses
gtts	Drops
h.	hour
HA	headache
HM	Hand Motion
h.s.	at bedtime
Hx	history
IOL	Intraocular Lens
IOP	Intraocular pressure
LP	Light Perception
LP+P	Light Perception and Projection
N	Near, Near Vision
NLP	No Light Perception
NPC	Near Point Convergence
nml	normal
OD	right eye
OS	left eye
p.c.	meal
PLT	Preferential Looking Test
prn	as needed
q.	every
q.h.	every hour
OU	both eyes
PERRLA	Pupils Equally Round and Reactive to Light and Accommodation
PP	near patient
PROS	Prosthesis
q.d.	once per day
q.i.d.	four times per day
R	Refraction
RD	Retinal Detachment
ROP	Retinopathy of Prematurity
RP	Retinitis Pigmentosa
Rx	prescription
S	Spectacles
Sx	Symptoms
TAC	Teller Acuity Cards
Tx	Treatment
TRD	Total Retinal Detachment
UTT	Unable To Test
V	Visual Acuity
VER	Visual Evoked Response
VF	Visual Field
W	glasses worn by patient

References

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