

Examination techniques in ophthalmology



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Basic examination techniques

1. Visual acuity
(natural, best corrected)
UCVA, BCVA
1. Measurement of intraocular pressure
2. Slit lamp examination
3. Fundus examination



I. Visual acuity

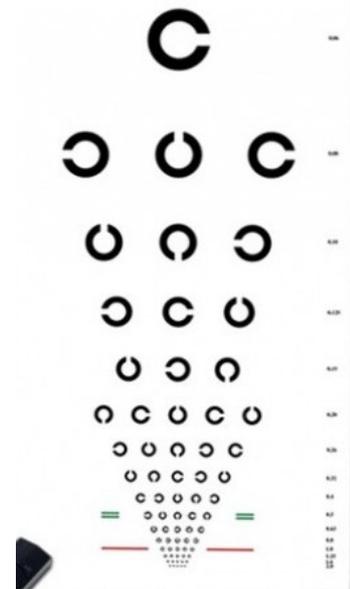
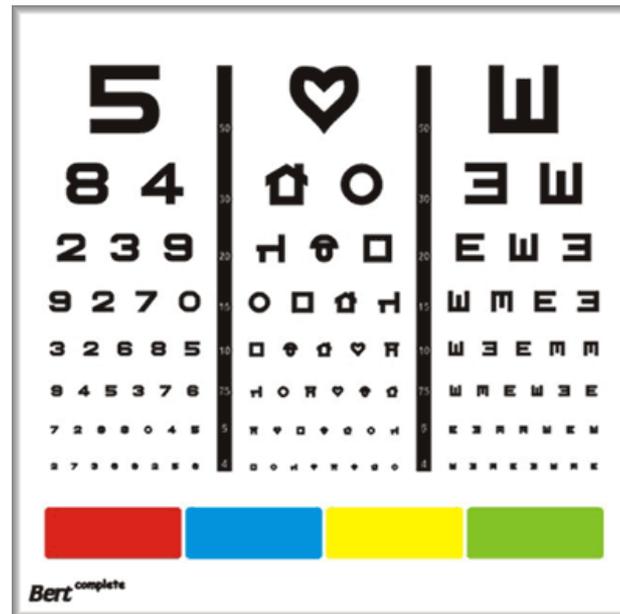
- Visual acuity (natural, best corrected)

- Distance vision
- Near vision
- Charts

- Snellen
- Landolt ring
- Pictures

- ETDRS – early treatment retinopathy studies

- Jaeger



I. Visual acuity

- Counting finger (metres)
- Hand movement
- Light perception



If the Visual acuity of less than 1 / 60 is recorded as:

Still can't read the chart?

Ask patient to count how many fingers you are holding up at 1 metre.

Keep fingers still. Recorded as Count Fingers (CF @1m)

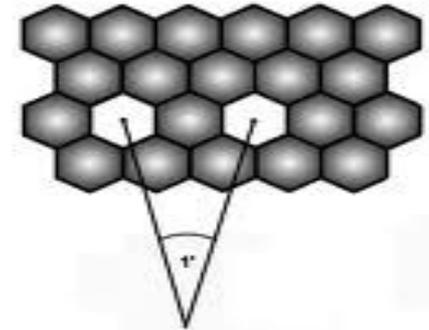
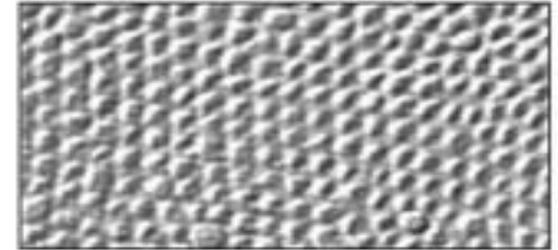
• If they cannot count fingers see if they can see a moving hand. Recorded as Hand Movements (HM @1m)

• Still no result: can they see a pen torch light : Light perception (LP)

• Unable to perceive light: No Light Perception (NLP)

I. Visual acuity

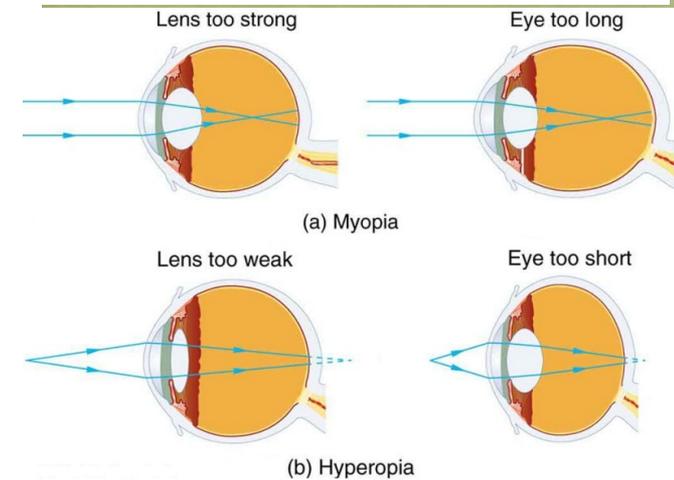
- 5/50 (metres, feet 20/200)
- 0,1



- Minimum separabile – minimum angle of resolution = the least separation at which two parallel lines are recognized by the eye as separate

II. Refraction

- **Refractive error is an optical abnormality in which the shape of the eye fails to bring light into sharp focus on the retina, resulting in blurred or distorted vision.**
- **In optometry, a "refraction" procedure is the measurement of refractive error**
- **Autorefractor**



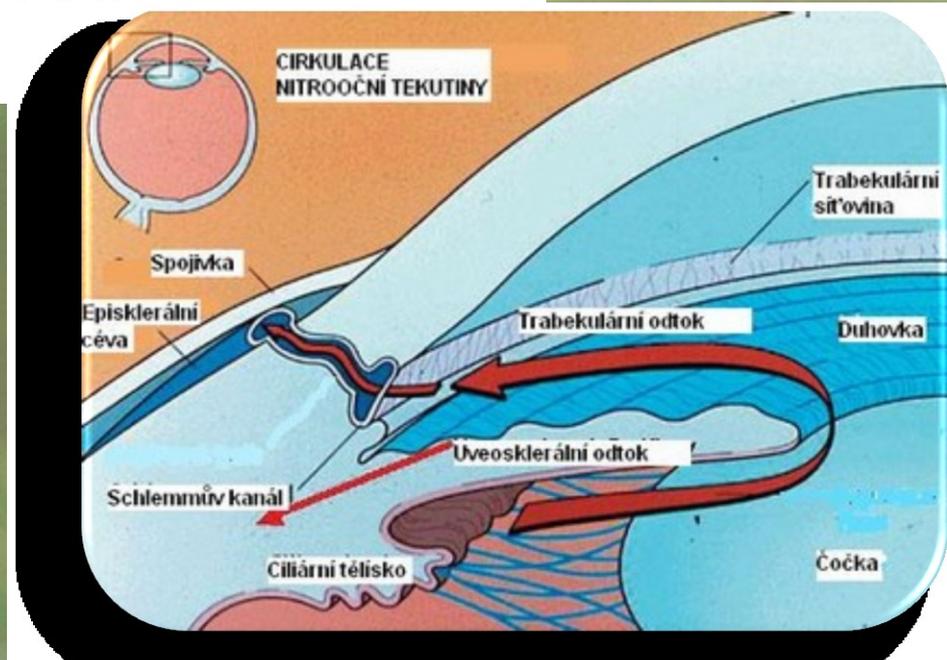
II. Refraction

- Frames
- lenses



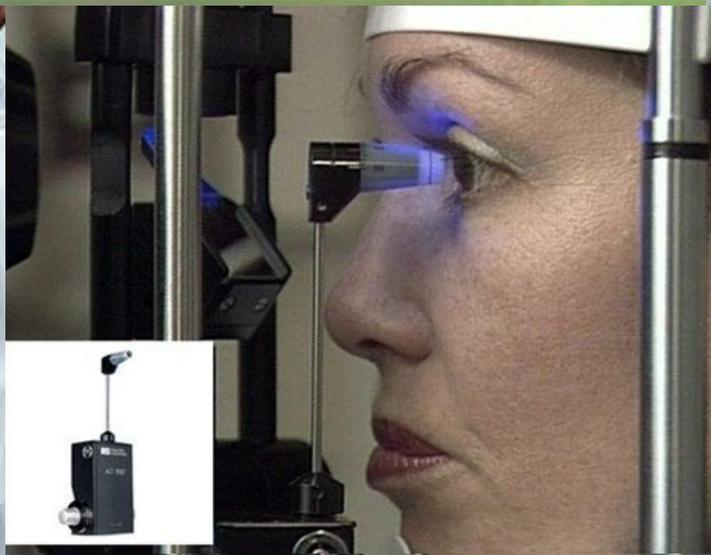
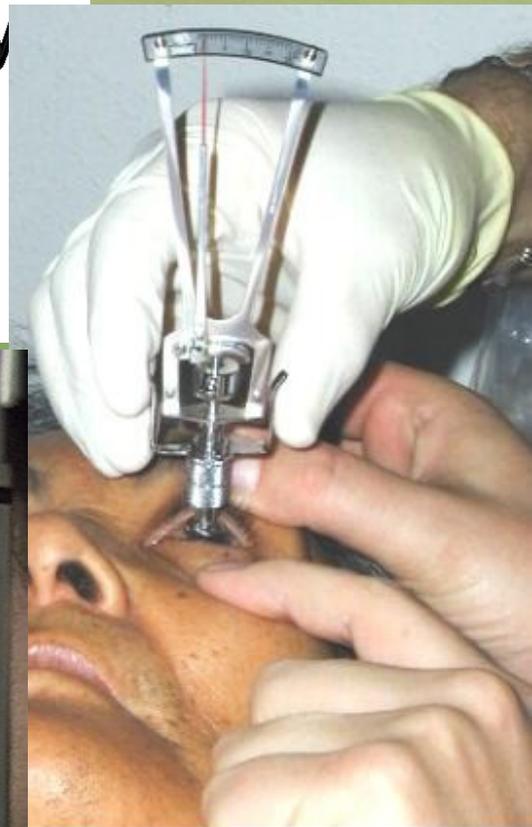
III. Tonometry

- Contact techniques
- Schiötz tonometry
- Goldmann applanation tonometry
- Non contact techniques
- Jet air (air puff)



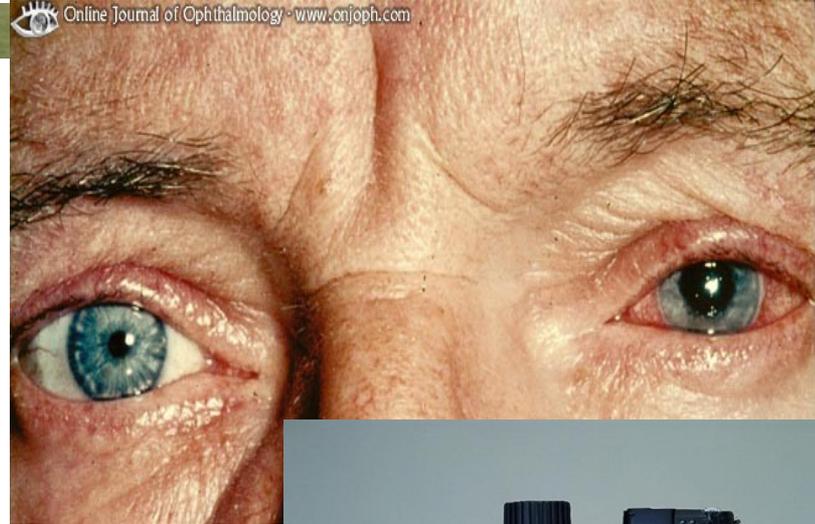
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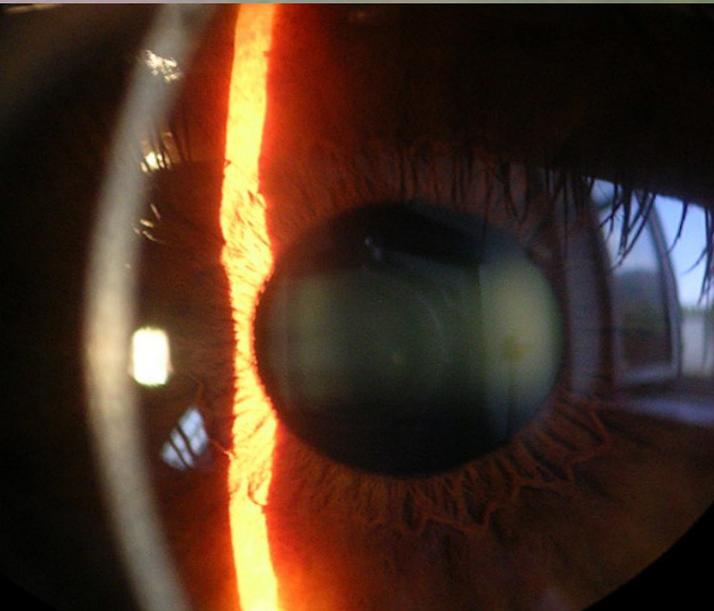
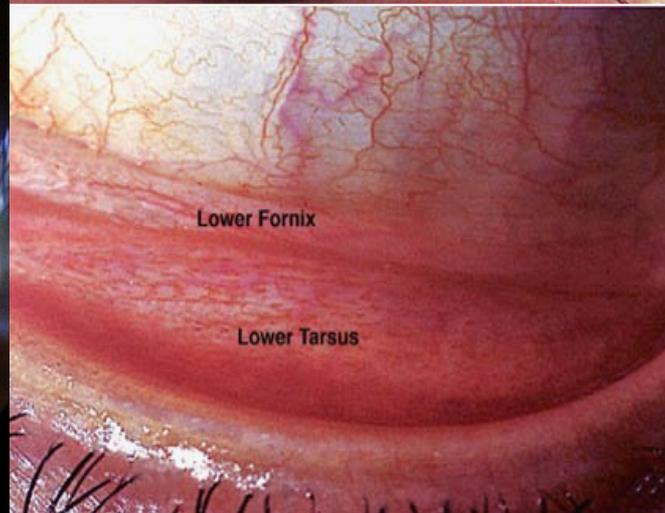
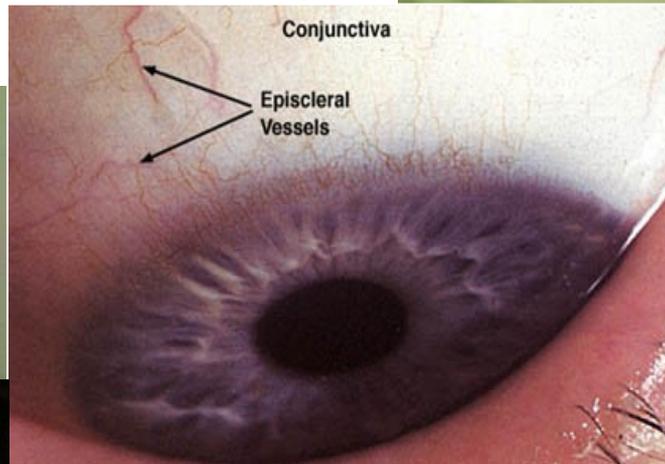
IV. Anterior segment examination

- **Aspection**
- **Slit lamp biomicroscopy**
table mounted microscope with
a special adjustable
illumination source attached



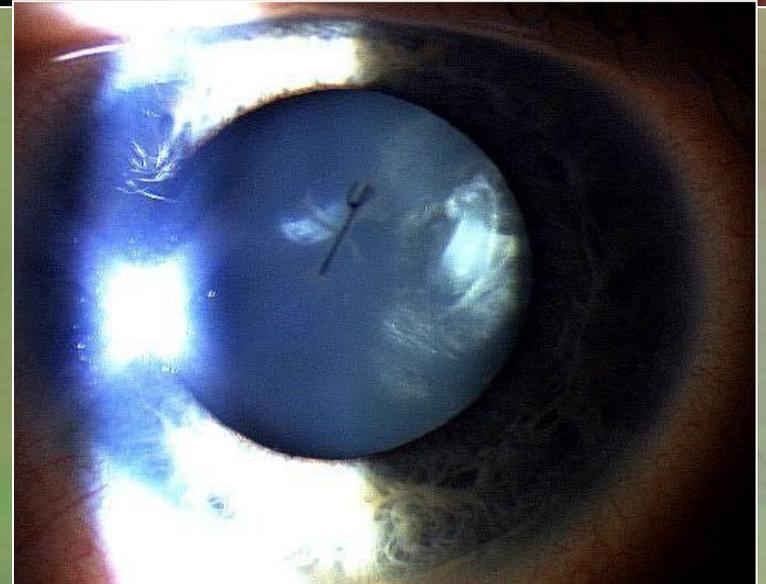
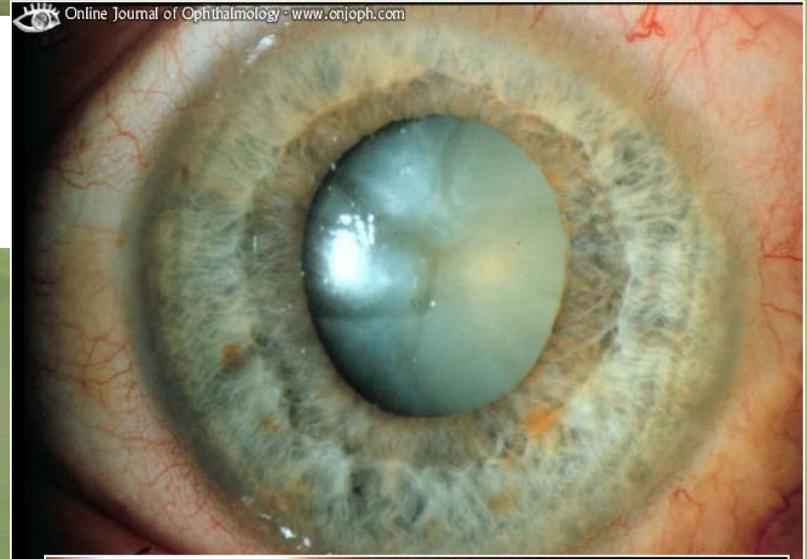
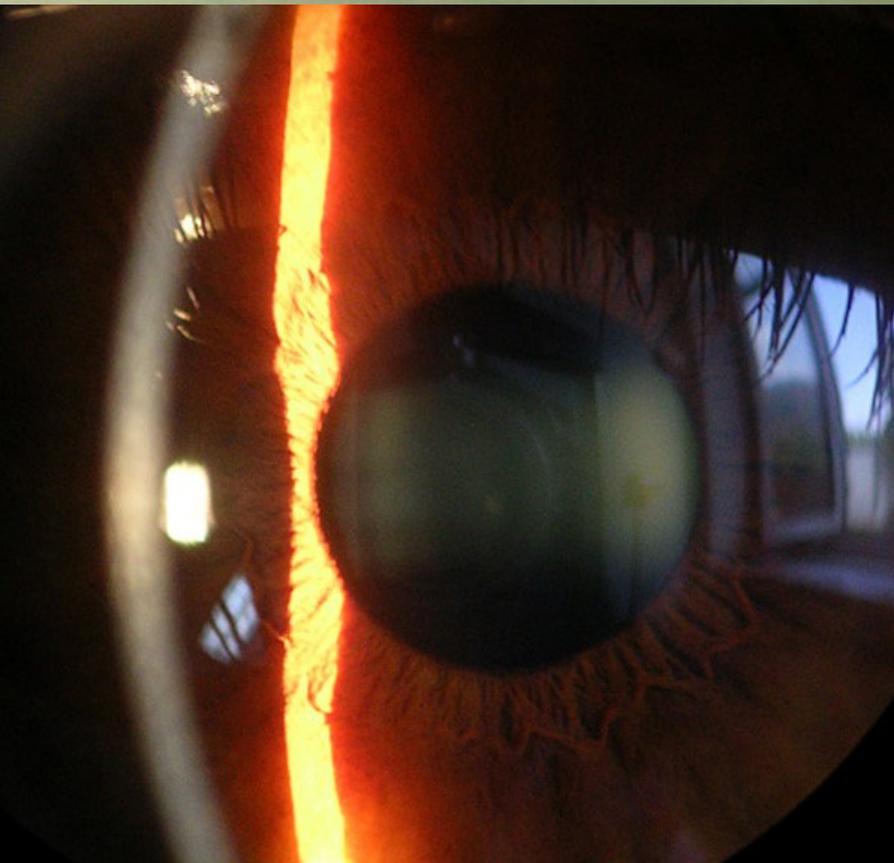
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- Slit lamp biomicroscopy



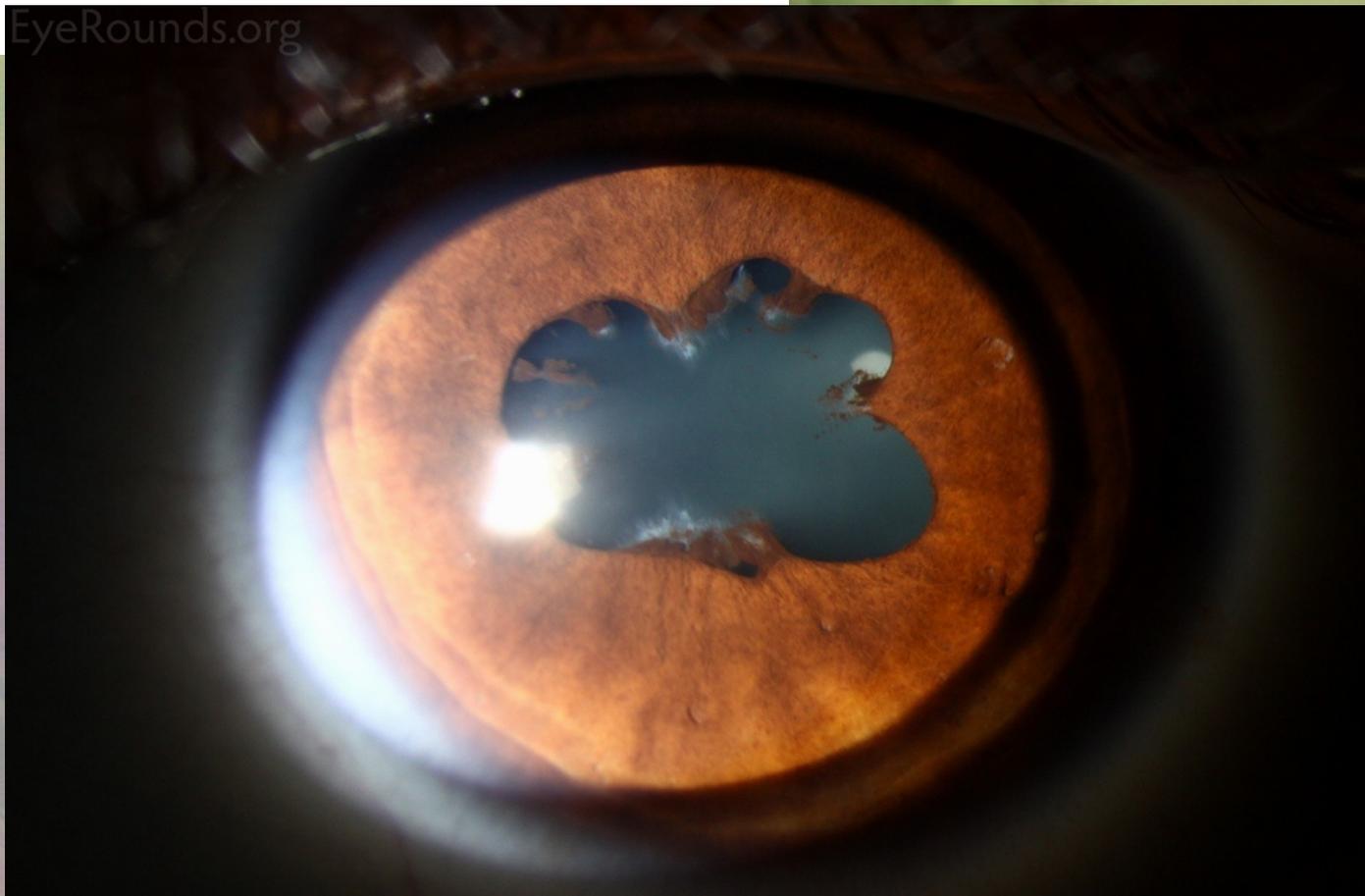
IV. Anterior segment examination

- Slit lamp biomicroscopy



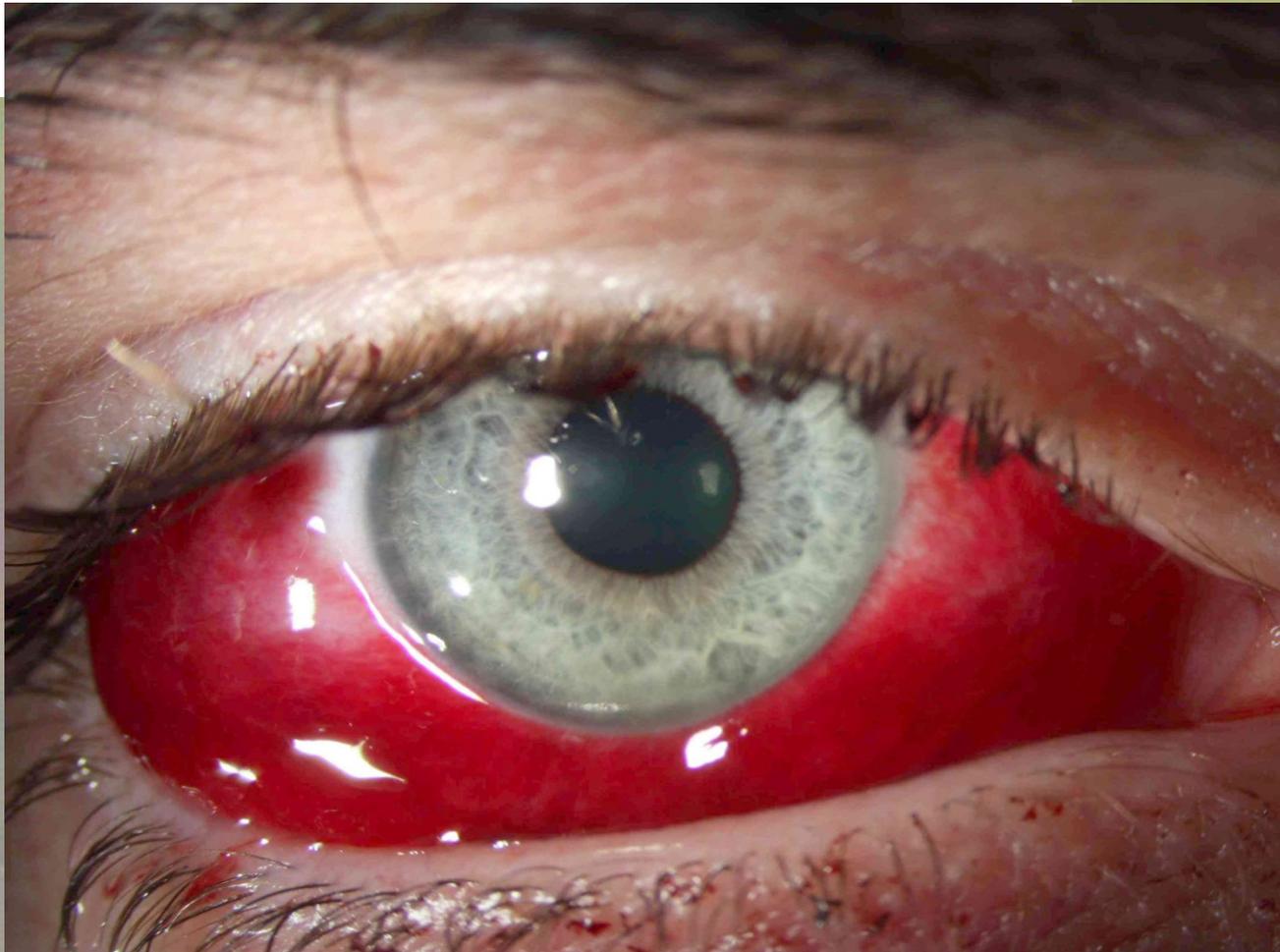
IV. Anterior segment examination

- **Posterior synechiae**



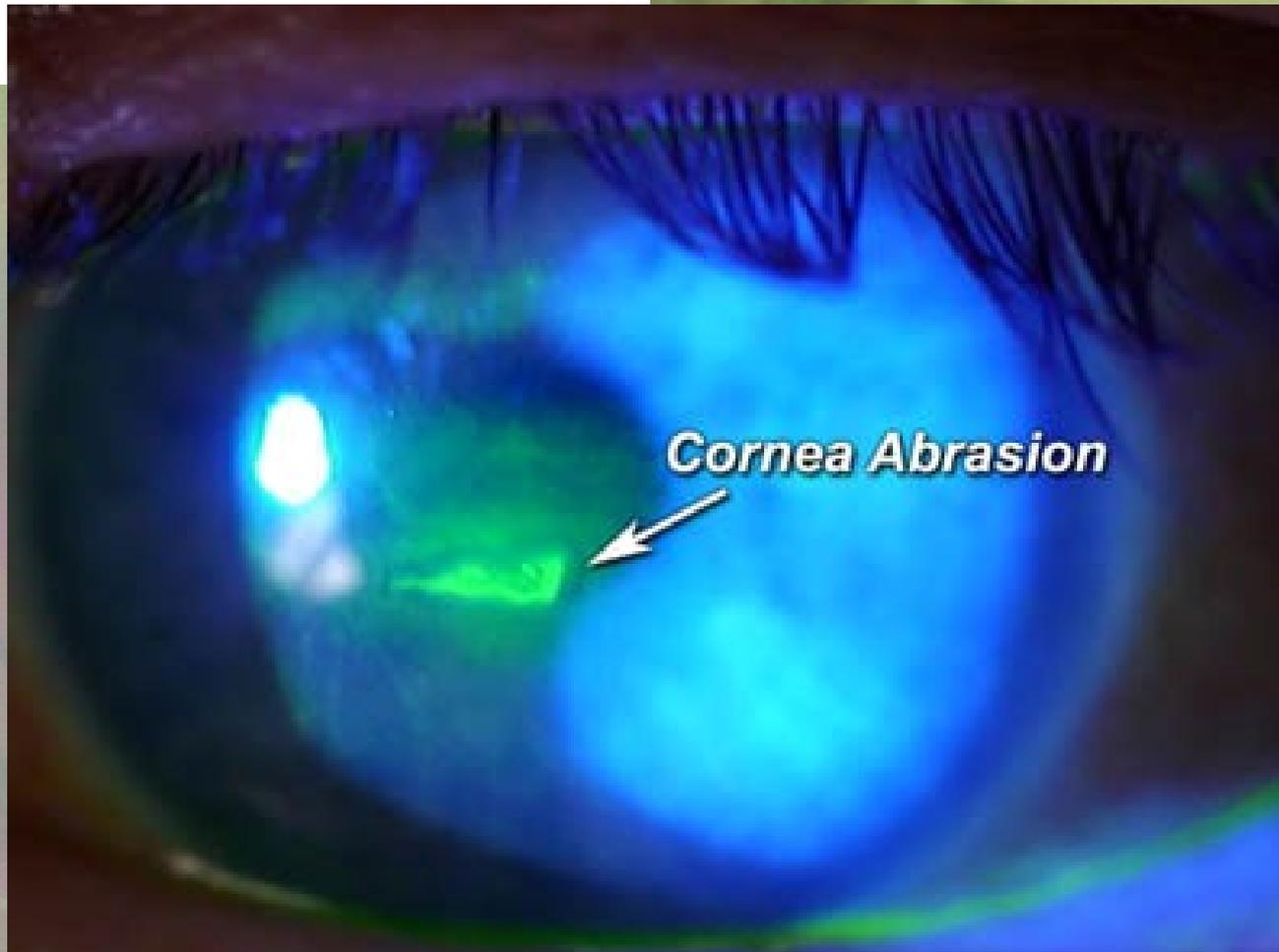
IV. Anterior segment examination

- Subconjunctival haemorrhage



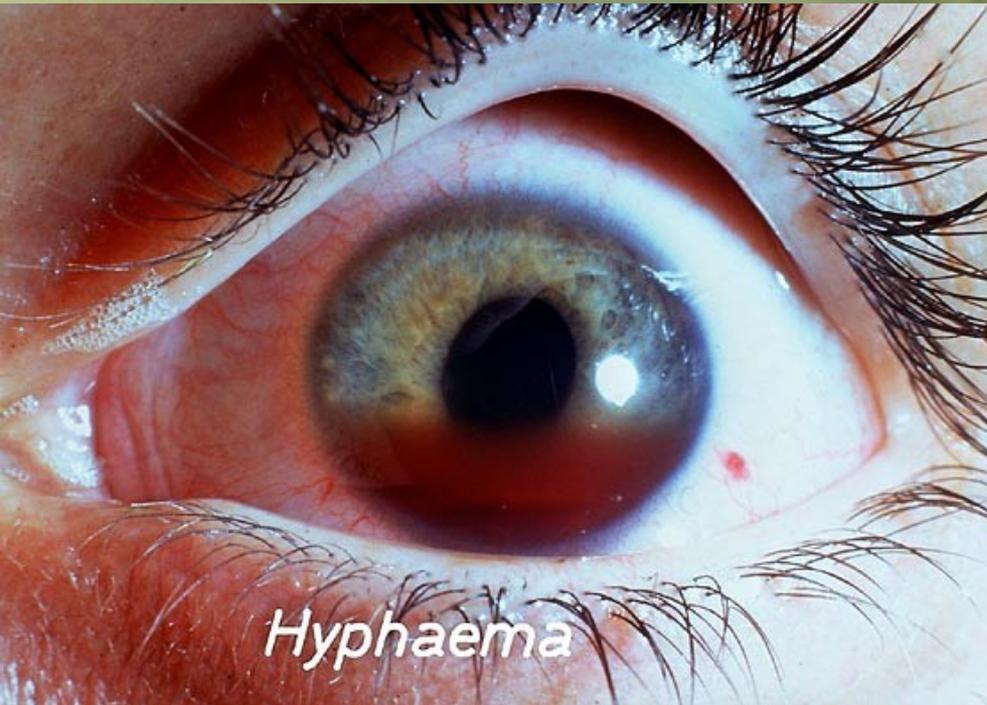
IV. Anterior segment examination

- Corneal abrasion



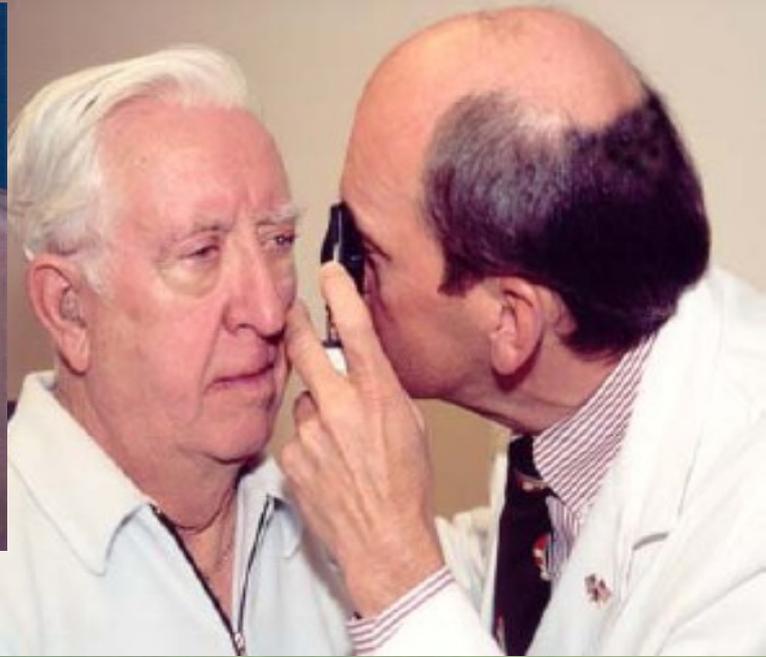
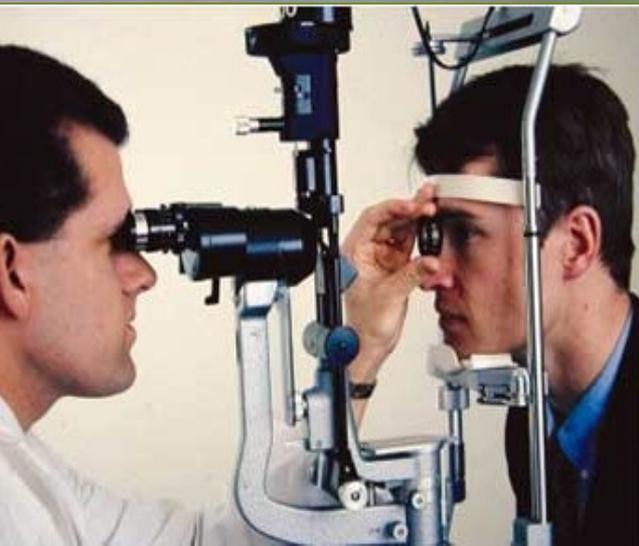
IV. Anterior segment examination

- Hyphaema and hypopyon



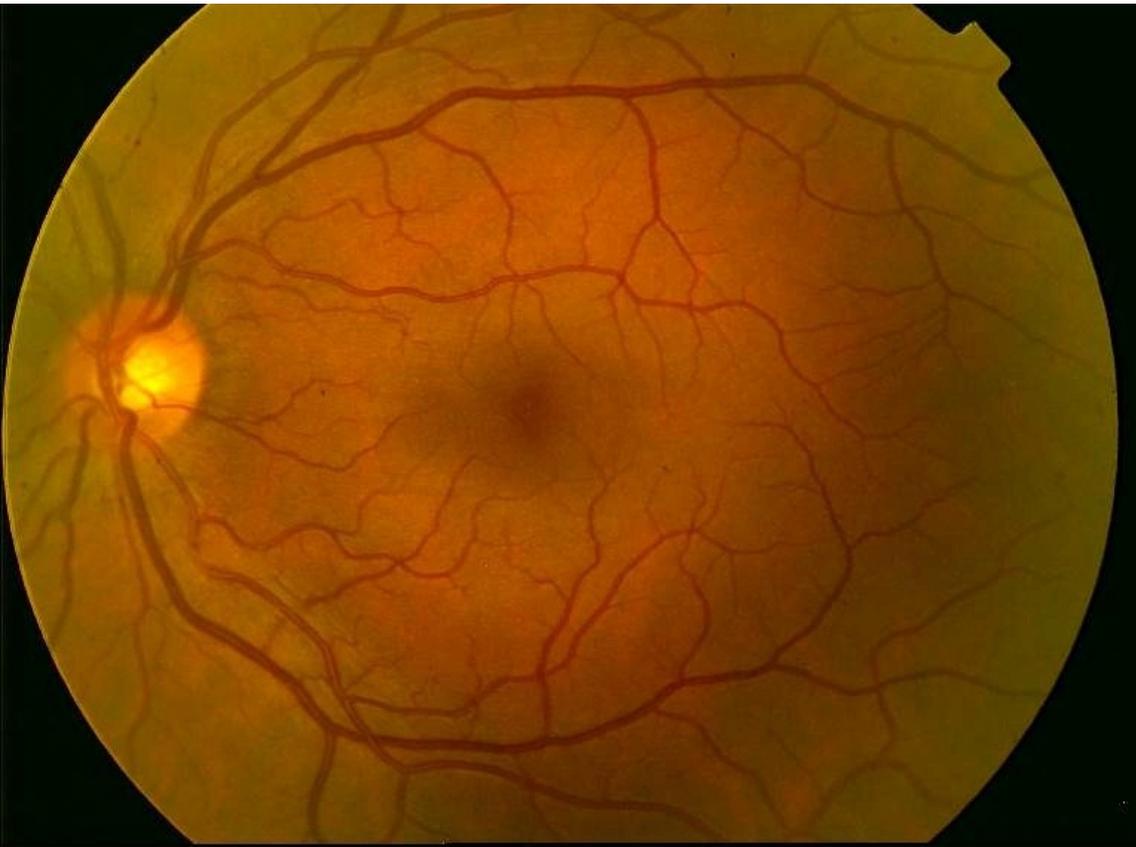
V. Posterior segment examination

- Ophthalmoscopy - direct
- - indirect
- Slit lamp biomicroscopy
(high power convex lens, the image is vertically inverted and laterally reversed)



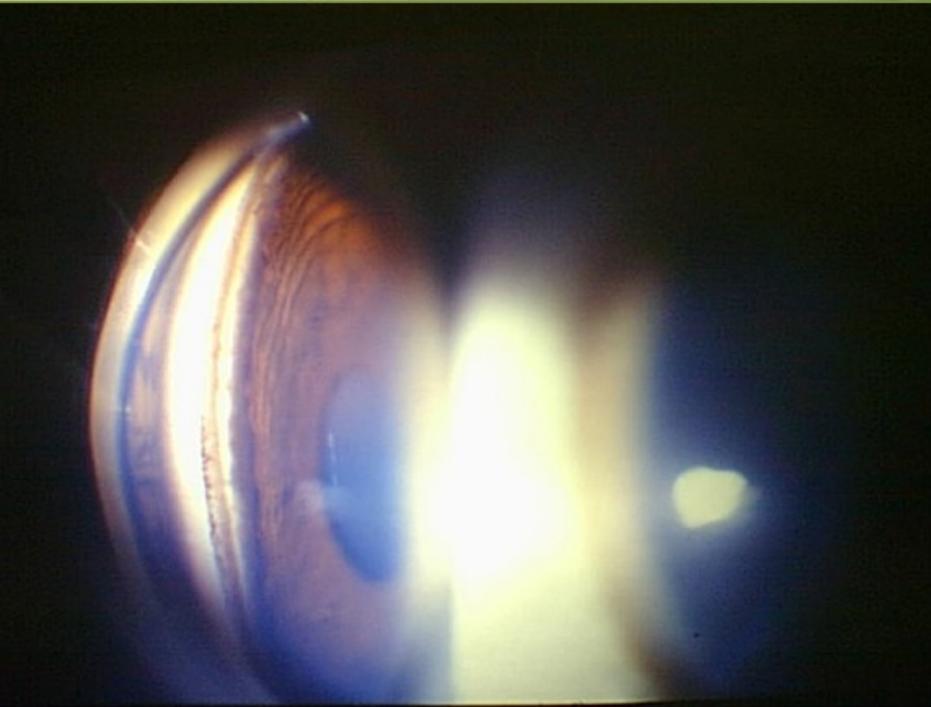
V. Posterior segment examination

- Ophthalmoscopy - ocular fundus



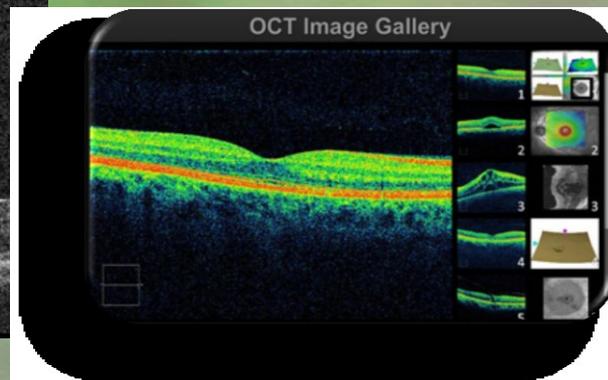
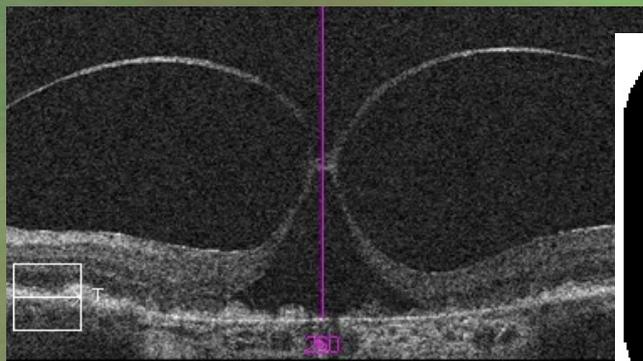
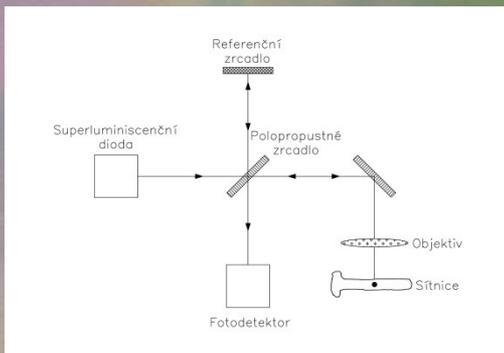
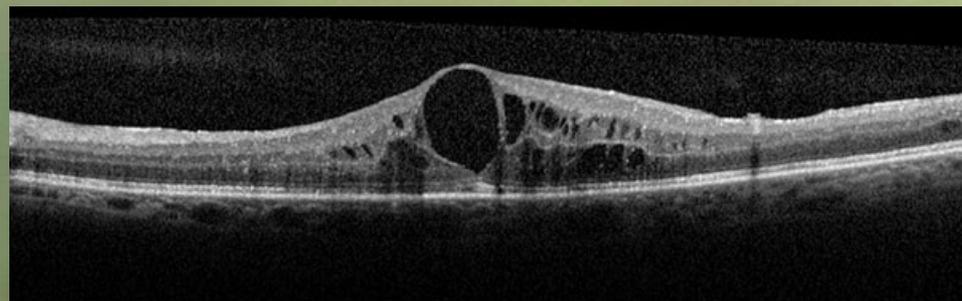
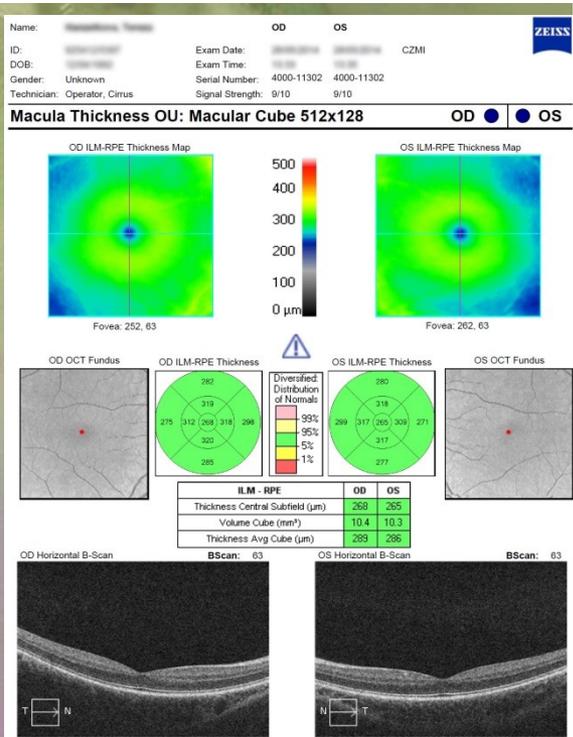
V. Special examination techniques

- **Gonioscopy**



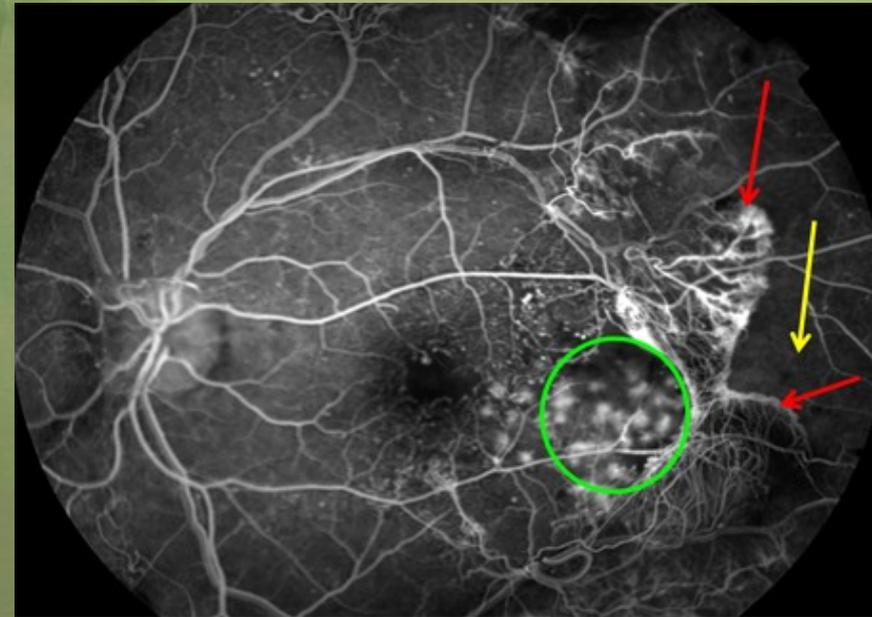
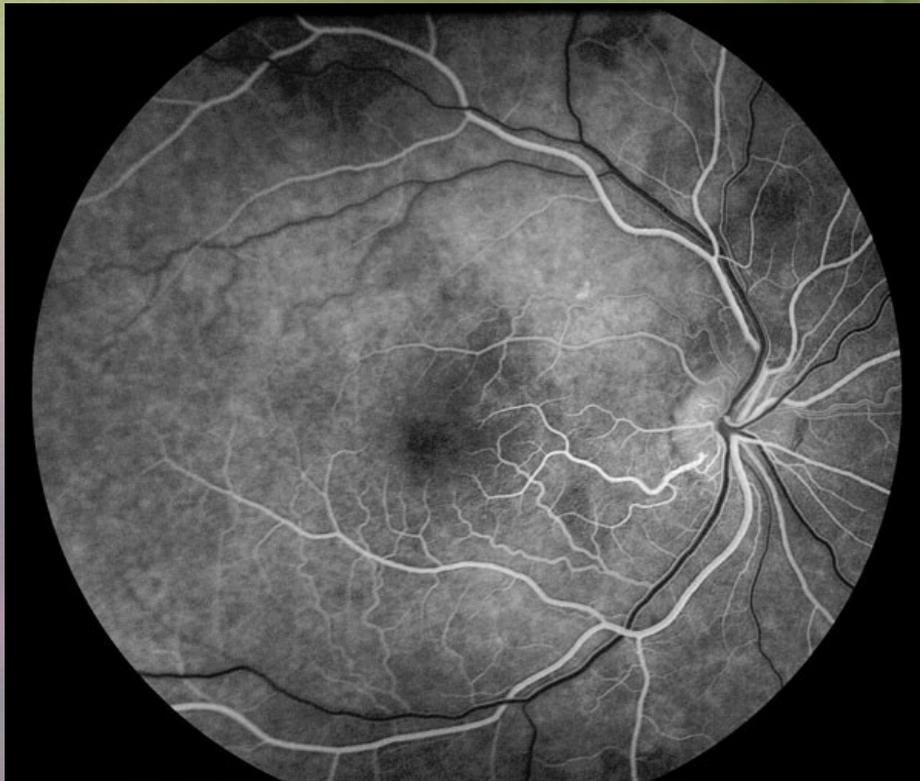
V. Special examination techniques

- Optical coherence tomography OCT



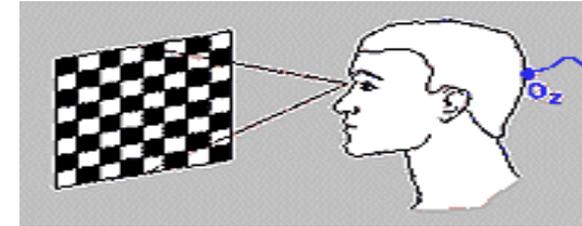
V. Special examination techniques

- Fluorescein angiography - FAG

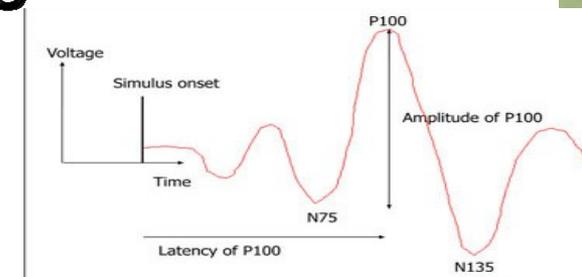


VI. Electrophysical tests

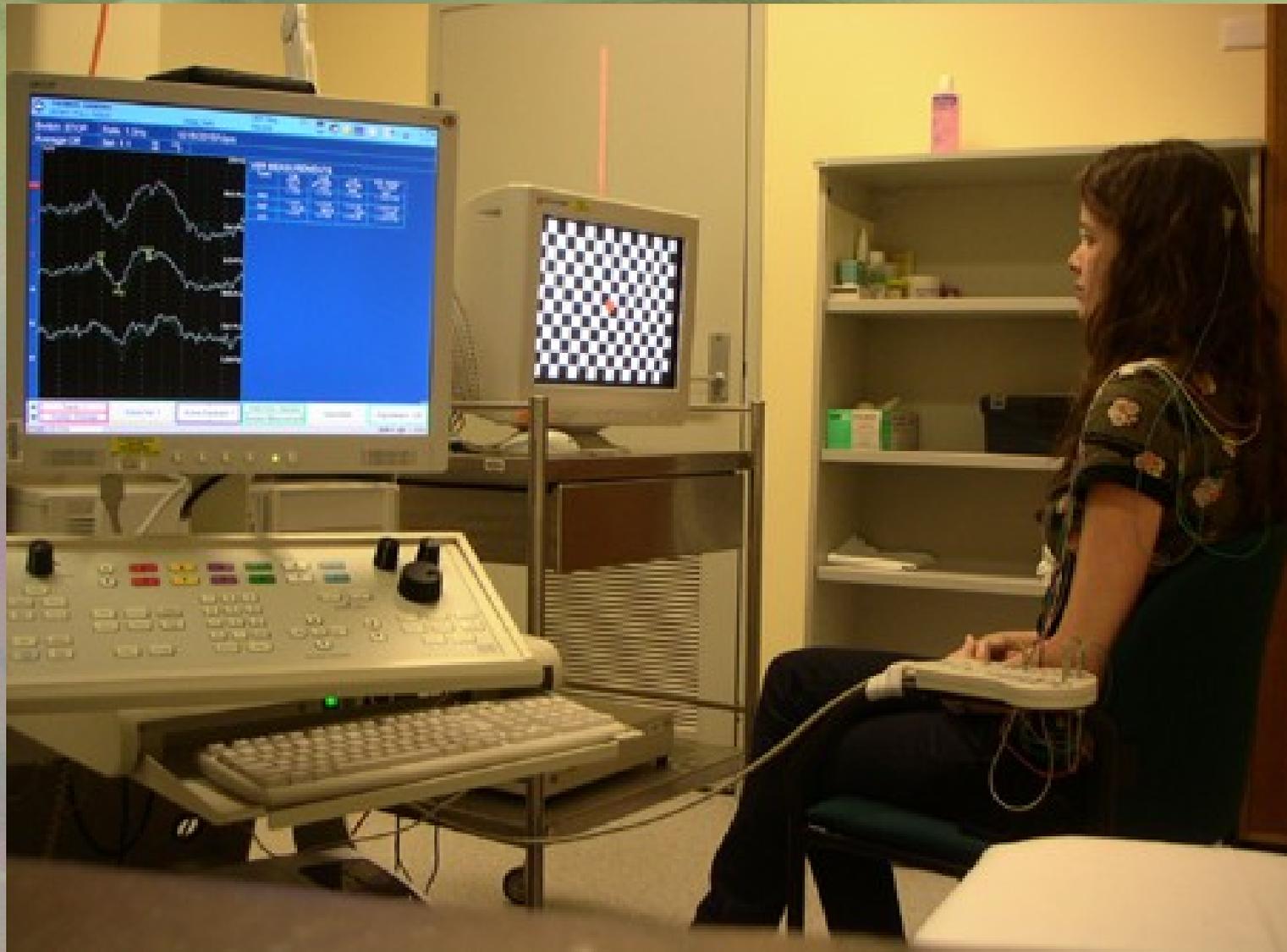
- **ERG (electroretinography)**
- diagnosis of functional defects of retina
- Record of an action potential produced by the retina when it is stimulated by light



- **VEP (visual evoked potential)**
- diagnosis of functional defects of visual pathways
- Record of electrical activity of the visual cortex created by stimulation of the retina



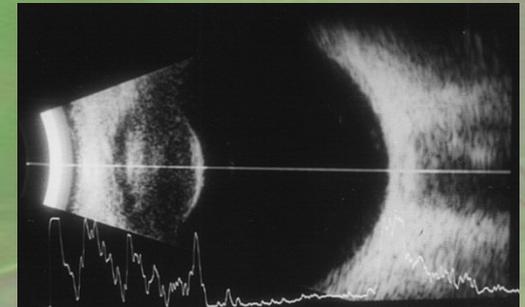
VI. Electrophysiological tests



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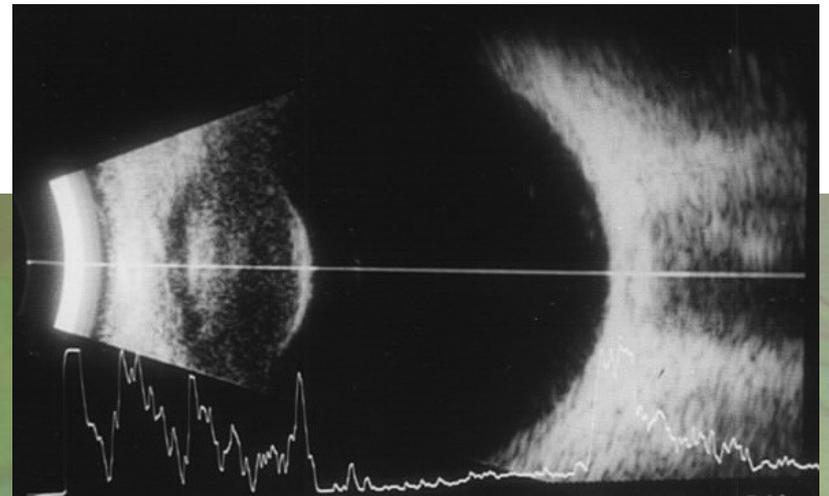
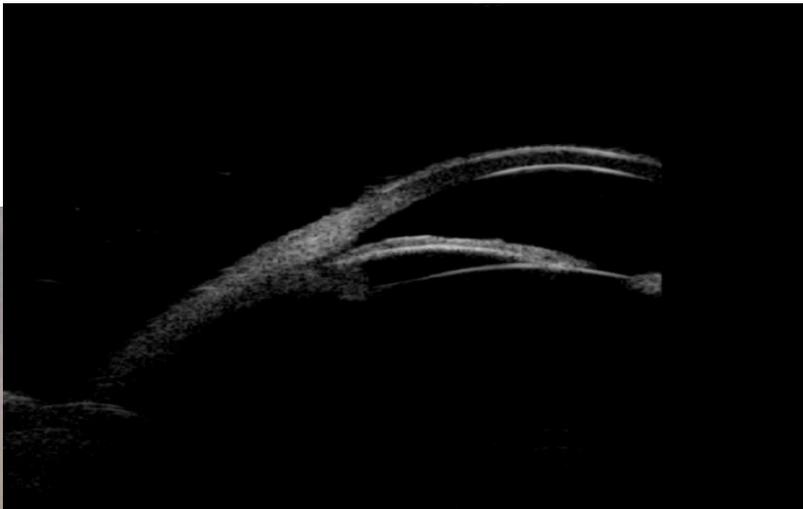


- **Ultrasound**



VI. Electrophysical tests

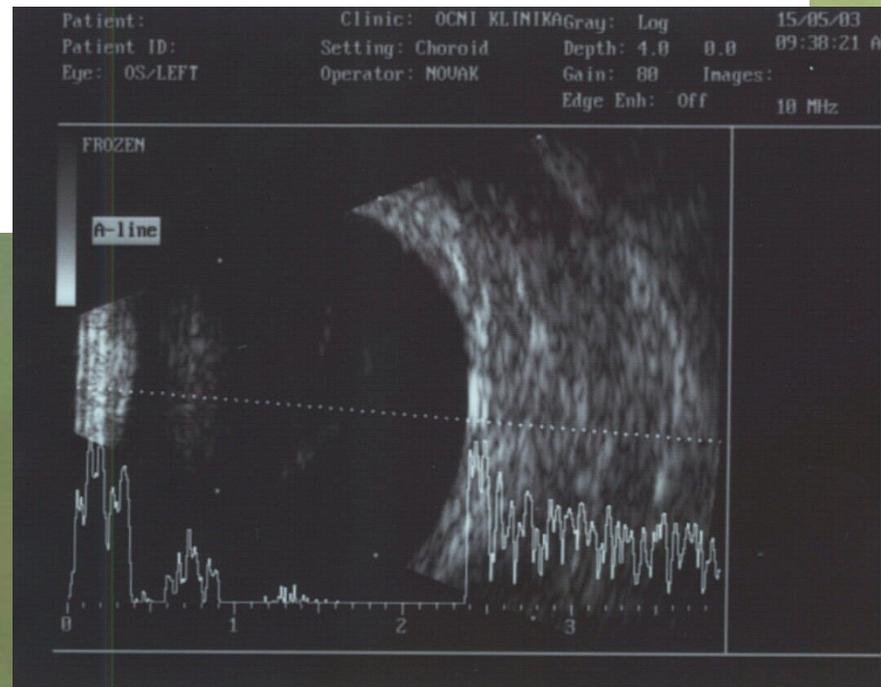
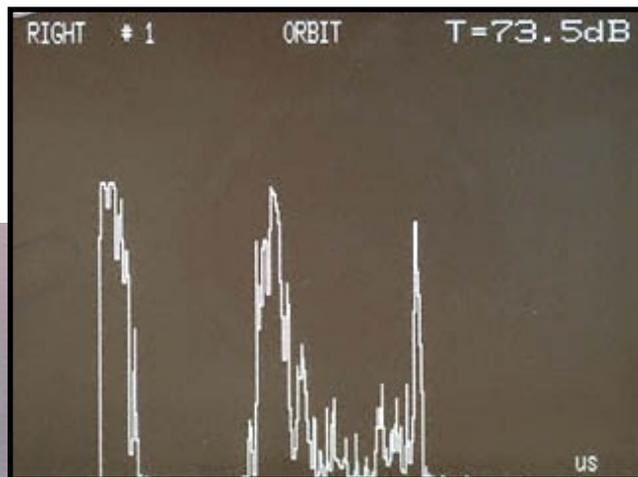
- **Ultrasound**
- **Non transparent optical media**
- **UBM- high frequency ultrasound – imaging of anterior segment**



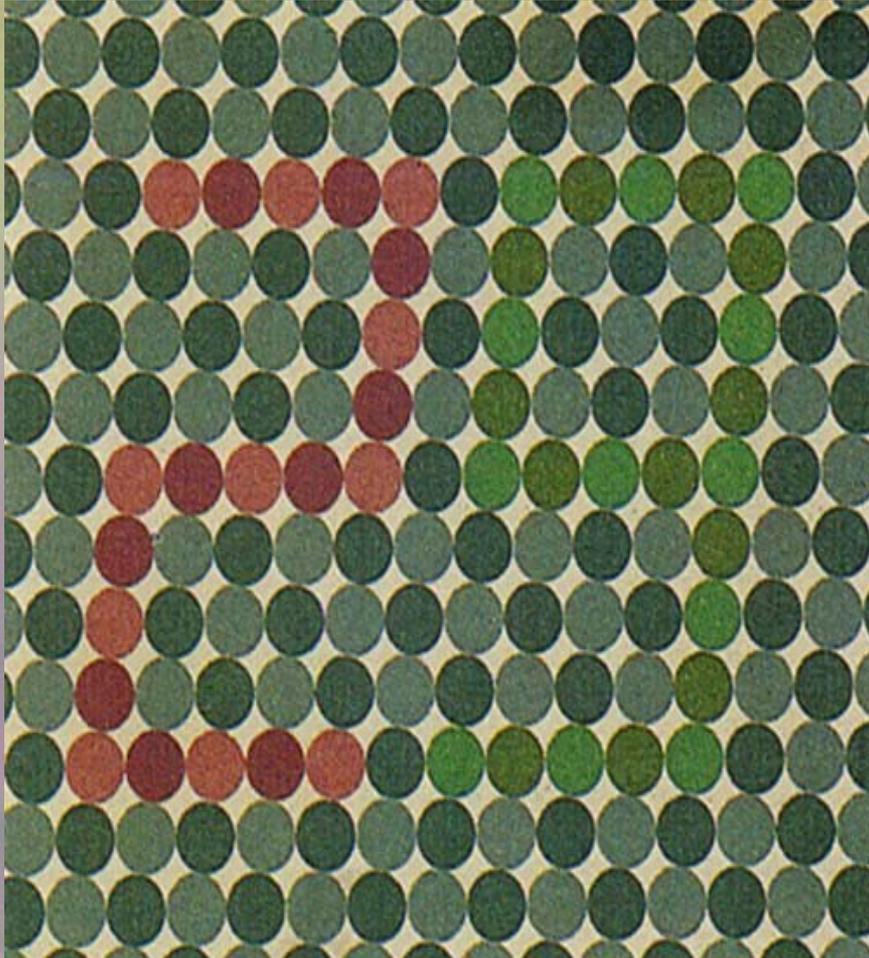
VI. Electrophysical tests

- Ultrasound
- A-scan

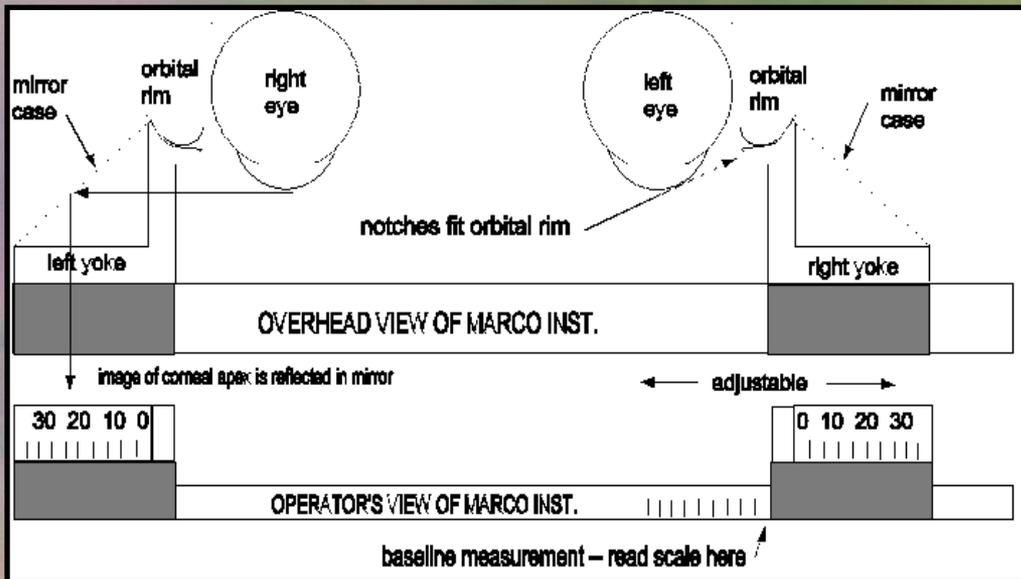
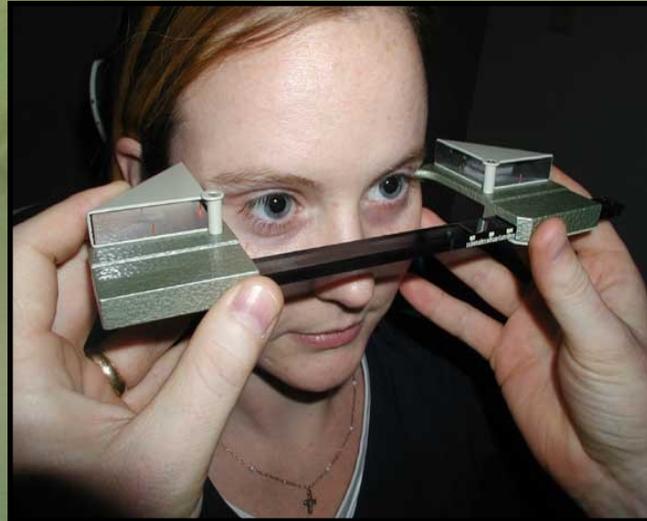
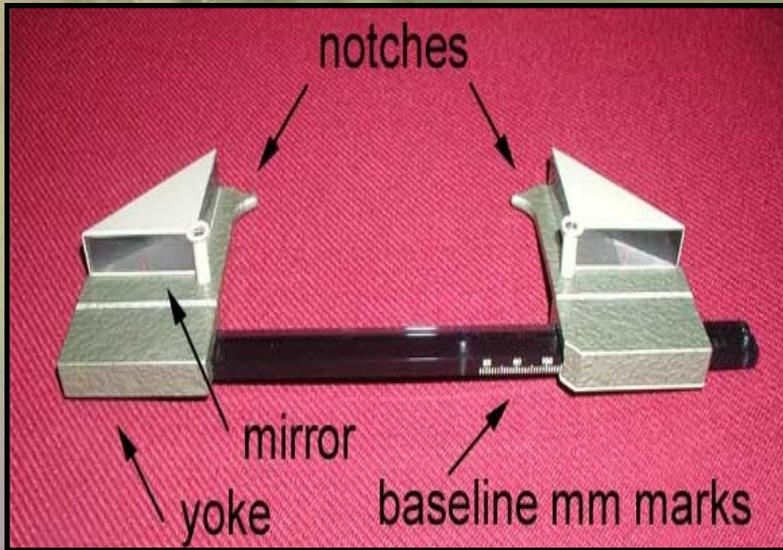
B-scan



VII. Color vision – HUE test



VII. Hertl exoftalmometry



Thank you for attention

