

Common Questions You May Be Asked By The Public

Tony Hanks, OD

Because you are working in an optometry practice, people will often expect you to know the answer to their question about eyes or eyecare.

Some of the most common topics are summarised here to assist you in being better prepared for these inevitable situations.



What Fees Do You Charge?

- ◆ This practice charges only the scheduled fees for all consultations, and recommended retail (or less) for all spectacles and contact lenses.
- ◆ Spectacles or contact lenses may be partially or fully covered by other entitlements. These include private health insurance, as well as programs for Pensioners, Veterans and School Children.

How Often Should We Have Our Eyes Examined?

- ◆ People need to have their eyes examined at different frequencies depending on their age and their visual situation.
- ◆ The most common average period is every 2 years.
 - This will usually be more frequent for children with vision problems and for the elderly with some progressive conditions (every 6 to 12 months).

- This period may be longer (up to 3 or 4 years) for people between 20 and 40 who do not wear a vision correction and have no eye or vision symptoms.
- ◆ Children should be checked routinely:
 - As babies.
 - Before they start school (3 or 4 years).
 - Every 2 years during the school years.
 - More frequently if advised for particular problems.
- ◆ Over 40 years of age, the need for a routine glaucoma test means an eye examination every 2 years.
- ◆ Regardless of any other advice, patients should always return immediately if they notice a problem. They do not need to wait until they are "due to come back"!

What Happens When I Have My Eyes Examined?

- ◆ A routine vision examination requires a total of approximately 35 minutes. This period of time is needed to perform all the tests necessary to thoroughly assess the eyes and visual efficiency.



- ◆ During an examination a health history will be taken. It is important for the patient to provide all information, regardless of how

insignificant they might think it is.

- ◆ During a complete examination all the following areas are covered:
 - Those related to eye health and general physical health
 - Clearness of vision
 - Focusing ability
 - Amblyopia (lazy eye)
 - Cataract assessment
 - Colour vision
 - Eye muscle control
 - Glaucoma testing
 - Macular degeneration
 - and other appropriate areas for the individual patient
- ◆ Following the examination, we carefully explain the results of testing and discuss our recommendations regarding any needed preventive or remedial care.

Summary:

ADVICE TO PATIENTS DURING EYE EXAMINATION

- Don't worry about making a mistake or giving the wrong answer
- Don't worry about your answers contradicting one another
- Don't hesitate to say so if you are unable to answer some of the questions
- Don't be alarmed if, for a few minutes during the examination, you find your vision getting worse instead of better

What is Visual Therapy?

- ◆ A series of programmed exercises or activities undertaken either:
 - To improve poorly developed visual, visual motor or visual perceptual skills
 - To further enhance the present visual skills to a higher level of efficiency and / or stamina.

- ◆ Visual therapy may be used in the treatment of such conditions as :
 - Eye turn (strabismus).
 - Lazy eye (amblyopia).
 - Poor eye movement or eye focussing skills (fine visual motor therapy).
 - In traumatic brain injury (accident and stroke).
 - Enhance specific visual abilities. (eg: required in a sport).
 - Developmental and visual perceptual deficits.
- ◆ Also called "Vision training".

What's Wrong With Ready-Made Spectacles?

- ◆ They discourage regular eye examinations, which include the checks of eye health and the important 2 yearly glaucoma tests.
- ◆ "One size fits all" means they are often uncomfortable on the bridge or ears.
- ◆ They never include astigmatism corrections and 80% of people have astigmatism.
- ◆ Are made to one distance between the lenses (a PD of 65), often resulting in prismatic effects and subsequent eyestrain when they are used.
- ◆ Always have the same power in both eyes, while over 80% of people have different prescriptions in the 2 eyes.
- ◆ Ready-mades are useful only for temporary and emergency use.

Why are "Own Frames" a Problem?

Patients are experiencing problems when an old frame has been used too many times:

- ◆ Old plastic frames become brittle with aging of the material.
- ◆ Old plastic frames become distorted from repeated stretching to fit multiple pairs of lenses.
- ◆ Old metal frames suffer metal fatigue from repeated adjustments to return them to correct alignment.



- ◆ It is false economy to use a frame which is unlikely to last the life of the lenses.
- ◆ This is especially true for progressives where accurate lens placement becomes very difficult if the lenses have to be refitted into a different frame later.
- ◆ Patients should also consider the issue of spare parts for discontinued frames and the value of having a back-up pair.
- ◆ In view of the unknown material weaknesses, using an old frame must always be at the patient's own risk.

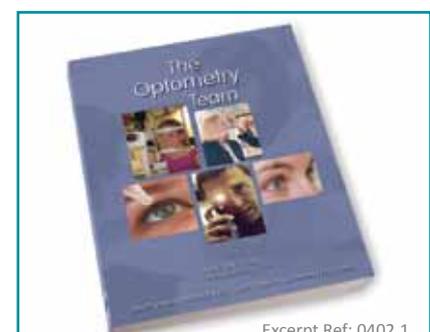
Guidelines for Use of "Own Frames"

The following information can be used as a guideline in advising patients:

GUIDELINES FOR RE-USE OF OLD FRAMES

Unless it is still a current model, the spectacle frame...

- ✓ Must be serviceable for the **expected life of the lenses**
- ✓ Should only be used for **up to 3 pairs** of lenses
- ✓ Should be **less than 4 years old** for general lenses
- ✓ Should be **less than 3 years old** for **progressives**



Excerpt Ref: 0402.1

The Optometry Team was written by optometrist Tony Hanks, OD and is now in its' 3rd edition.

The book is available from optometry association bookshops or on-line from www.hanks.optom.com.au