

TELANGANA KANTI VELUGU

*“Jeethe Jeethe Raktadaan
Jaathe Jaathe Netradan”*

Avoidable Blindness
Free Telangana
(ABFT)



Vision Screening Camp User Guide

Kanti Velugu Camp Layout

Table 1

Registration (Medical Record)

Staff: 2 ASHAs



Table 2

Visual Acuity Assessment

Staff: ASHAs & AWWs



TAB 1
Registration Details
& 1-6 fields
(Visual Acuity
to Prescription)

Table 3

3 A

Medical
& Ocular
History

3 B

Anterior Segment
Evaluation &
Prescription & Referral

3 C

Distribution
of
Medicines

Staff: Medical Officer, Staff Nurse & ANM



Table 4

4 A

Objective Refraction

4 B

Subjective Refraction

Staff: Optometrist & 1 Support Staff



Table 5

5 A

Issue or
Order of Spectacles

5 B

Data Entry & Photo
with Spectacles

Staff: Pharmacist / Staff Nurse &
ANM & Health Supervisors (Any two)



EXIT

If vision is = 6/6 or better



TAB 2
Optometrist
Observation & Photo
with Spectacles

Table 1 Registration - Medical Record

Individual registration in Medical Record



Aadhaar card: To record basic demographic details



Visual Acuity assessment

- **Who will do**
 - ✦ 2 Accredited Social Health Activists (ASHAs)
- **Time duration**
 - ✦ 2 to 3 minutes for data capture and screening form allocation
- **Potential outcome**
 - ✦ Individual's demographic details



Table 2 Visual Acuity Assessment

ASHAs & AWWs will be present at the Visual Acuity Assessment desk



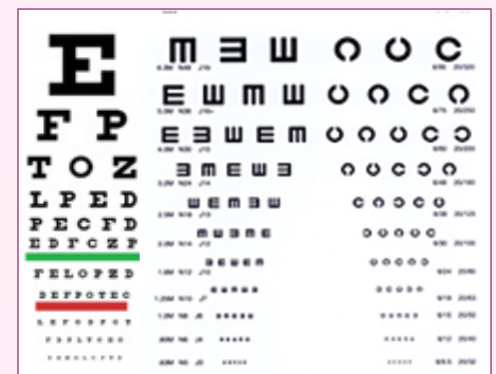
Distance and Near Visual acuity will be assessed



Procedure explained below



History and Anterior Segment Evaluation



Distance Visual Acuity

• Snellen Chart:

- ✦ The chart is used to measure visual acuity for distance
- ✦ It is printed to have 11 lines of block letters or Tumbling E oriented in 4 different directions (up, right, down and left)
- ✦ First line consists of one large letter and the subsequent rows have increasing no. of letters that decrease in size

- **Procedure:**

- ◆ The person taking the test will be seated at a distance of 6 meters or 20 feet from the chart
- ◆ Visual acuity is measured monocularly (one eye at a time)
- ◆ The person covers left eye (with his/her palm / with the occluder) & read out the letters / the direction of the Tumbling E
- ◆ Examiner records the visual acuity as the smallest row that can be read with the specific eye
- ◆ The same procedure will be repeated for the other eye (with the earlier test eye covered)



- **Instruction to the individual:**

- ◆ For reading letter chart: “Please read the alphabets on the chart, starting with the top row from left to right”
- ◆ For Tumbling E chart: “Please tell the direction of the open part of the “E” is facing, starting on the top row and moving from left to right”

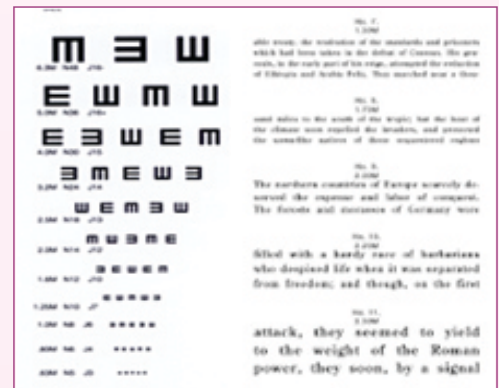
Near Visual Acuity

- **Near vision chart / booklet:**

- ◆ The booklet / chart is used to measure visual acuity for near
- ◆ The book consists of a smaller version of Tumbling E chart and paragraphs of text in different sizes such as N6, N12, N24 and N36

- **Procedure:**

- ◆ The person who is taking the test will hold the chart or booklet at a distance of 30 – 40 cm (usual reading distance of any individual)
- ◆ Visual acuity is measured monocularly (one eye at a time)
- ◆ The person covers left eye (with his/her palm / with the occluder) & read out the paragraph / the direction of Tumbling E
- ◆ Examiner records the visual acuity as the smallest row / text that can be read with the specific eye
- ◆ The same procedure will be repeated for the other eye (with the earlier test eye covered)



- **Instruction to the individual:**

- ◆ For reading paragraph: “Please read the text on the chart, starting left to right or right to left (for Urdu text)”
- ◆ For Tumbling E chart: “Please tell me the direction of the open part of the “E” is facing, starting on the top row and moving from left to right”

- **Who will do**

- ◆ ASHAs and Anganwadi Workers (AWWs)

- **Time duration**

- ◆ 3 to 5 minutes per individual per ASHA / AWW (individual dependant)

- **Potential outcome**

- ◆ Individual’s visual acuity measurements for distance and near (this can be either unaided or with the individual’s current glasses)

Table 3

Medical & Ocular History, Evaluation & Medicine Distribution

3A Medical & Ocular History

Medical History:

- ✦ Any history of Diabetes Mellitus
- ✦ Any history of Hypertension

Ocular History:

- ✦ Presence of defective vision
- ✦ History of any eye surgery
- ✦ History of any head / eye injury
- ✦ Using any medicines etc.

• Who will do

- ✦ Medical Officer and Staff Nurse / ANM

• Time duration

- ✦ 2 to 3 minutes per individual

• Potential outcome

- ✦ General and Ocular health history

3B Anterior Segment Evaluation:

• Procedure:

- ✦ Aim is to examine and diagnose any anterior segment pathology such as:
 - Cataract
 - Cornea condition (infection/injury or scar etc.)
 - Squint
 - Pterygium and etc.
- ✦ The examiner shows a pen torch (with diffuse light) on to the person's eye and examines the anterior segment for any pathology
- ✦ In the presence of any ocular condition, the examiner records the condition by correlating with the flip book provided at the screening camp

• Who will do

- ✦ Medical Officer (MO) using a pen torch

• Time duration

- ✦ 2 to 3 minutes per individual (depending on the experience of the examiner)

• Potential outcome

- ✦ Anterior segment pathology (if any, as mentioned earlier)

3C Distribution of Medicines

• Procedure:

- ✦ Medical Officers will be prescribing the medicines if the patient has any of the following eye ailments
 - Conjunctivitis
 - Dry eye
 - Any ocular infections or allergies etc. and
 - Any general health medicines
- ✦ These medicines will be provided at the end of examination

• Who will do

- ✦ Medical Officer (MO) and Staff Nurse / ANM

• Time duration

- ✦ 2 minutes per individual (depending on the requirements)

• Potential outcome

- ✦ Medicines prescription and distribution



Table 4 Refraction

4A Objective Refraction (Autorefractor)

- **Autorefractor:**

- ✦ The autorefractor is a non-invasive device used to rapidly assess the refractive status of the eye (i.e. short (Myopia) or long sightedness (Hyperopia) or Astigmatism) and decide if a person needs spectacle correction

- **Procedure (depending on the type of instrument and target):**

- ✦ The person simply views small lights / a picture through a lens
- ✦ This instrument measures the refractive status of both the eyes at the same time or one eye at a time

- **Instruction to the individual:**

- ✦ "Please look at the light / target in the center of the screen"

- **Who will do**

- ✦ 1 Optometrist and 1 Support Staff

- **Time duration**

- ✦ 2 minutes per individual

- **Potential outcome**

- ✦ Refractive status of the eye and if a person needs spectacle correction

4B Subjective Refraction

- **Trial lens set and visual acuity charts:**

- ✦ Trial lenses set includes positive & negative powered spherical and cylindrical lenses
- ✦ A trial frame (similar to a spectacle frame) to hold the lenses when examining the refractive status of a person
- ✦ An occluder lens to cover one eye during the subjective refraction procedure



- **Procedure:**

- ✦ Aim is to correct the person's refractive error (found out in the previous step) by asking him/her choose what they like, while being guided by the examiner
- ✦ The person who is taking the test will be seated at a distance of 6 meters or 20 feet from the vision chart
- ✦ With one eye covered using the occluder, the examiner checks that the refraction values obtained in Step4A are correct for the person by using a set of lenses from the trial set
- ✦ The examiner will either increase / decrease the power of lenses and direct the person to read the smallest Snellen line and asks "is the line clearer with the lens or without"
- ✦ Similar process continues until the best corrected visual acuity is achieved
- ✦ The same procedure will be repeated for the other eye (with the earlier test eye covered)
- ✦ **Result:** To find the most suitable lens to be prescribed for the person

- **Who will do**

- ✦ 1 Optometrist and 1 Support Staff

- **Time duration**

- ✦ 5 to 10 minutes per individual (depending on the quantity of refractive error and experience of the examiner)

- **Potential outcome**

- ✦ Quantification of refractive status of the eye and prescribing spectacles (if needed)

Table 5 Issue / Order of Spectacles & Data Entry

- **Dispensed at the counter:**
 - ✦ For the simple refractive errors, the spectacles can be readily dispensable on the day of the screening camp itself
- **Dispensable on another camp day:**
 - ✦ For higher refractive errors and complex prescription with cylindrical powers etc.
 - ✦ These prescriptions will be recorded and ordered for custom making
 - ✦ All the individuals with this type of prescription will be given a follow-up date to collect their spectacles
- **Who will do**
 - ✦ 1 Pharmacist / Staff Nurse, ANM and Health Supervisors (Any two)
- **Time duration**
 - ✦ 3 to 5 minutes per individual (depending on the prescription)
- **Potential outcome**
 - ✦ Off the shelf spectacle distribution (OR) Appointment for Spectacle collection



Data Entry

- **Data entry will be carried out at two tables:**
 - ✦ At the completion of examination at Table 3
 - Demographic details
 - Distance and near visual acuities
 - Medical & ocular history
 - Anterior Segment Evaluation findings will be entered into a tablet computer based application
 - Referral for surgery (or) further evaluation (if any)
 - Medicines prescription (if any)
 - ✦ At the completion of collection / order of spectacles at Table 5
 - Optometrist's observations
 - Photo of medical patient record
 - Patient's photo with the spectacles



To avoid a trip to DMK, visit a Health Care Provider and mail this completed report with your scores reviewed.

EYE TEST REPORT

(To Be Completed by a Health Care Professional, save the back of this card)

I have examined the patient named on this form, and have accurately reported my findings from that examination.

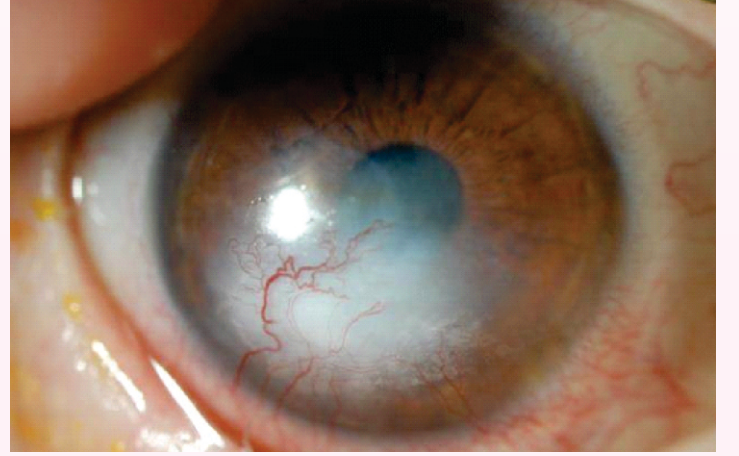
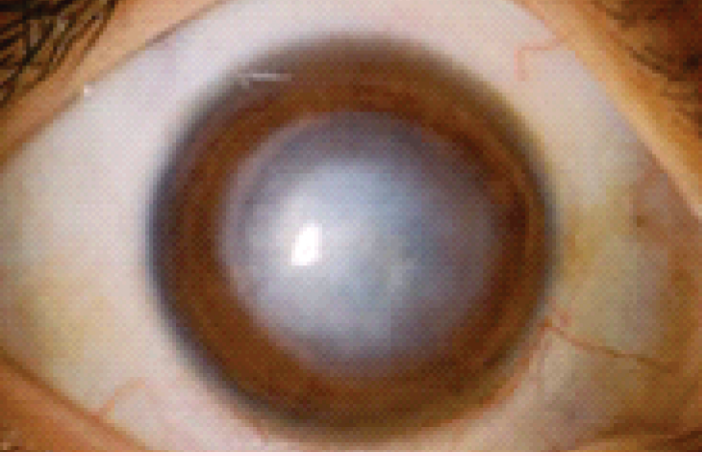
Patient's Last Name		First	M.I.	Date of Birth	Sex
Patient's Address (Number and Street)		City		State	Zip Code
Examiner's Address (Number and Street)		City		State	Zip Code
Name and Title of Examiner		City		State	Zip Code
Are corrective lenses required to achieve a Crowl's Test score of 20/40 with one or both eyes? <input type="checkbox"/> YES <input type="checkbox"/> NO		Side of Examination		Date of Examination	
Best Vision Test Score (Snellen)		Right	Left	Both	J. / /
Patient's Signature		Examiner's Signature		Professional License No.	
Sign Here ✕		Sign Here ✕			



ಪ್ಲಿಪ್ ಛಾರ್ಟ್ Flip Chart

ಕಾರ್ನಿಯಾ ಅಂಧತ್ವಂ

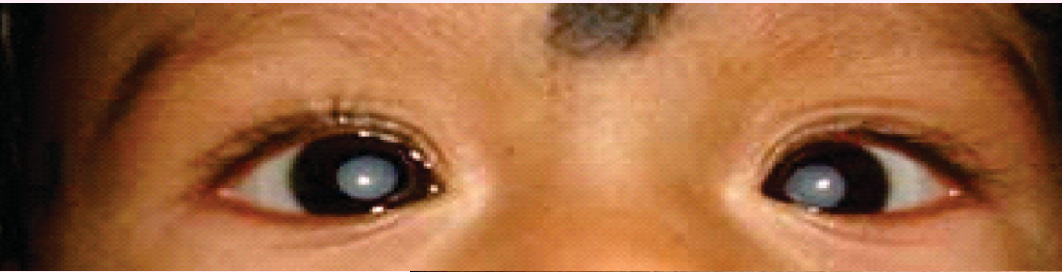
Corneal Blindness



Corneal Scar (injury/infections, etc.)

ಫುಕ್ಟಂ

Cataract



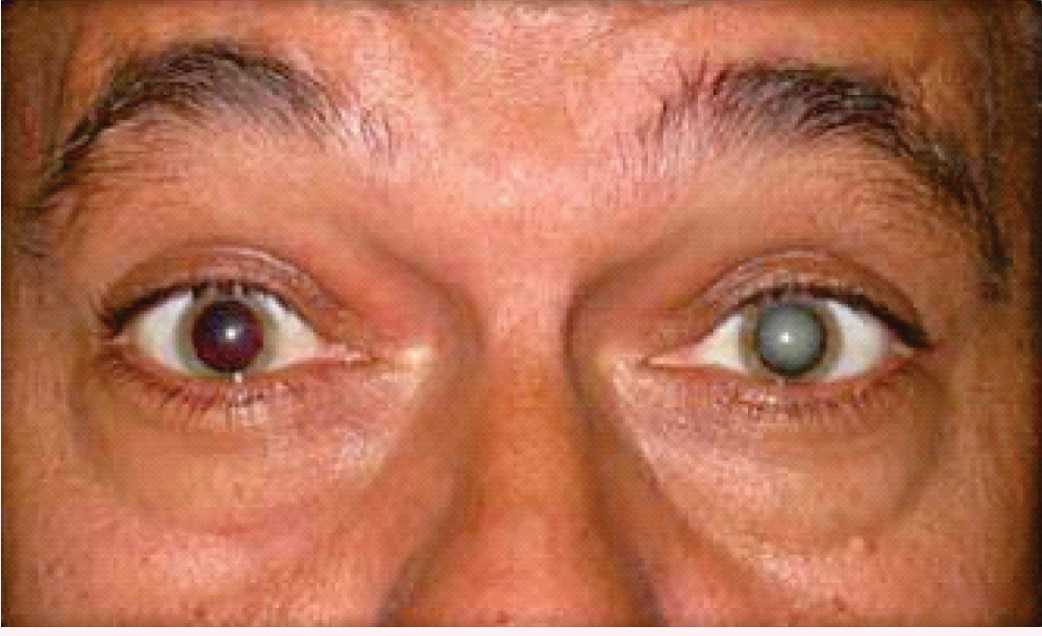
Congenital
cataract

ಛಿನ್ನ ಪಿಲ್ಲಲಲಾಠಿ
ಫುಕ್ಟಂ



శుక్లం

Cataract



పెద్ద వారిలో శుక్లం
Cataract (in adults)

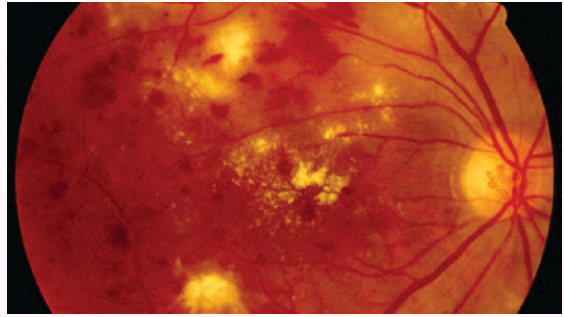
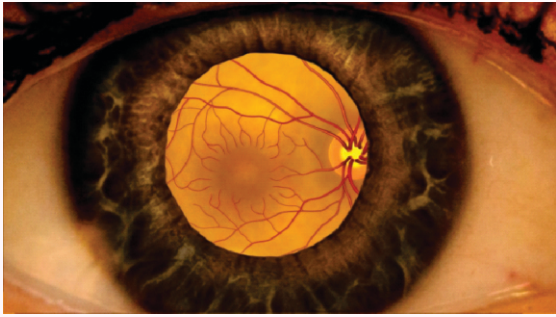
మెల్ల కన్ను

Squint



ఉయాబెటిక్ రెటినాపతి

Diabetic Retinopathy

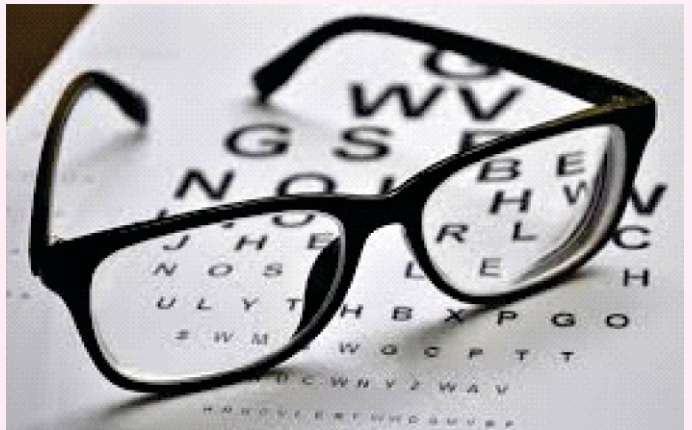


Normal vision

Vision with Diabetic Retinopathy

దృష్టిలోపాలు - రిఫ్రాక్టివ్ దోషం

Uncorrected refractive error

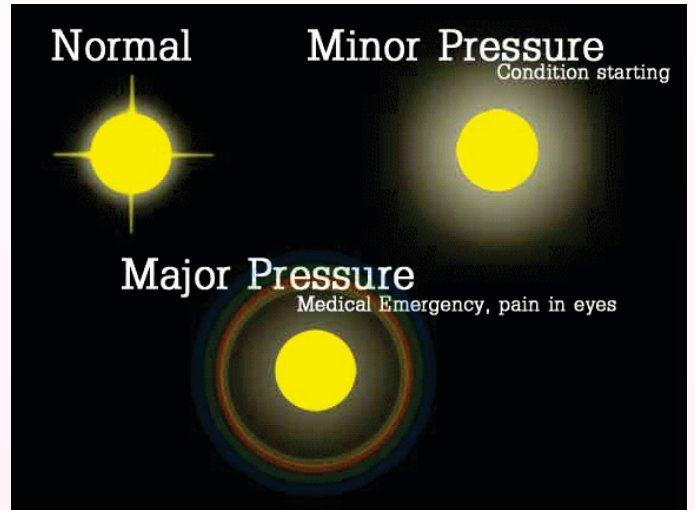


నీటి కాసులు (గ్లౌకోమా)



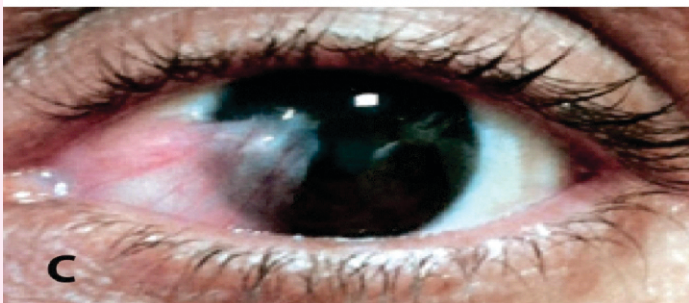
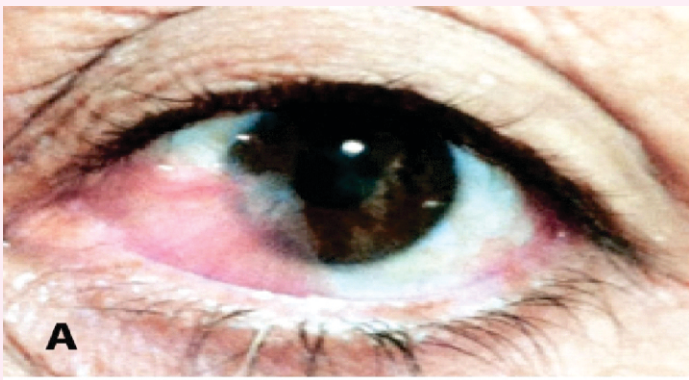
Vision with Glaucoma

Glaucoma

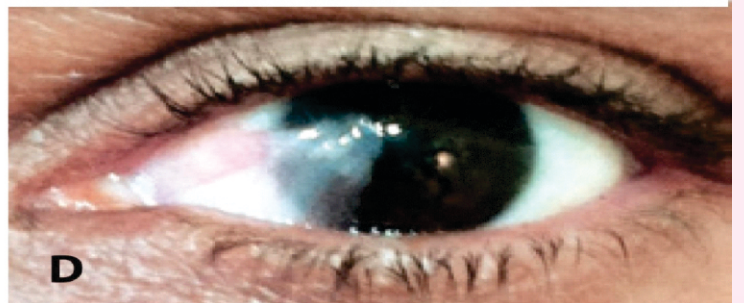
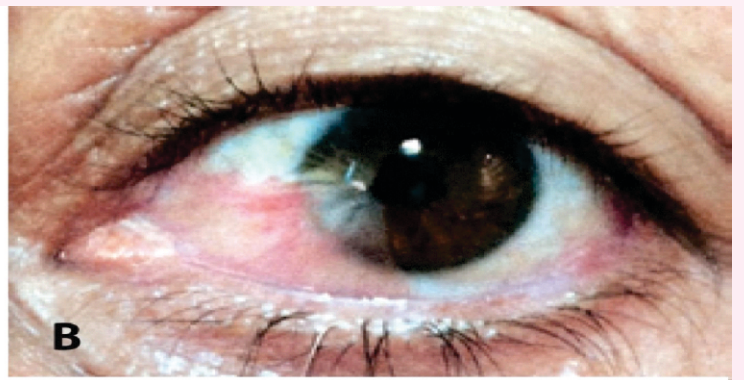


Halos around light with Glaucoma

టెరిజియమ్



Pterygium





*Jeethe Jeethe Raktadaan
Jaathe Jaathe Netradaan*



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