**OPD ASSESSMENT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Initial assessment done by Optometrist |  |  |  |  |
|  | Triage system followed e.g. Patients with sudden decrease in vision, Red eye, ocular trauma are seen on priority basis |  |  |  |  |
|  | Ocular History documented for all patients |  |  |  |  |
|  | Systemic history Taken |  |  |  |  |
|  | Systemic history includes DM, HTN, Cardiac Ds, Asthma, Rheumatoidarhrtitis |  |  |  |  |
|  | BHP History taken for cataract patients |  |  |  |  |
|  | Medication History-Past & Present |  |  |  |  |
|  | Drug Allergy History |  |  |  |  |
|  | BP, Pulse rate done for all OPD patients |  |  |  |  |
|  | Height, Weight, Immunisation Status for Paediatric Patients |  |  |  |  |
|  | Visual acuity Recorded |  |  |  |  |
|  | Visual Acuity with Pin Hole |  |  |  |  |
|  | Auto Refraction done for all patients |  |  |  |  |
|  | Retinoscopy done for all patients |  |  |  |  |
|  | Subjective Refraction |  |  |  |  |
|  | Subjective refraction done including Duochrome, Worth Four Dot Test, IPD Measure and others |  |  |  |  |
|  | IOP done by NCT for all OPD patients |  |  |  |  |
|  | Slit lamp examination done for every patient |  |  |  |  |
|  | Slit lamp cleaned after examining every patient |  |  |  |  |
|  | Who does Slit lamp exam-Doctor? |  |  |  |  |
|  | Dilated Fundus Examination done by 90D/78 Dfor all patients on first visit |  |  |  |  |
|  | Tropicamide plus Phenylephrine used for dilatation |  |  |  |  |
|  | Instructions and side effects of dilating drops explained to patient before dilatation |  |  |  |  |
|  | Time of instilling dilating drops documented on case sheet |  |  |  |  |
|  | Cycloplegic refraction done in all Paediatric patients |  |  |  |  |
|  | Atropine used for patients < 2 years |  |  |  |  |
|  | Homatropine/Cyclopentolate used for patients 2-8 years. |  |  |  |  |
|  | Post Mydriatic test done for paediatric patients |  |  |  |  |
|  | Applanation tonometry done for all patients |  |  |  |  |
|  | Gonioscopy done for all patients |  |  |  |  |
|  | If gonioscopy not done then is AC depth assessed by Van Hericks method before dilatation |  |  |  |  |
|  | B-Scan done for each Hyper Mature Cataract patient |  |  |  |  |
|  | If not is ROPLAS done in all patients |  |  |  |  |
|  | Pupillary reaction documented for all patients before dilatation |  |  |  |  |
|  | Applanation tonometer and gonioscope cleaned after each use |  |  |  |  |
|  | Provisional diagnosis documented by doctor in case of referral for sub -speciality opinion |  |  |  |  |
|  | Plan of management documented on case sheet |  |  |  |  |
|  | Final diagnosis with ICD coding on face sheet |  |  |  |  |
|  | Syringing done in all patients |  |  |  |  |
|  | After syringing antibiotic drops to be given to every patient |  |  |  |  |
|  | Final glass prescription given by? |  |  |  |  |
|  | Status about the corneal patient  |  |  |  |  |
|  | Status about the glaucoma patient  |  |  |  |  |
|  | Status about the retina patient  |  |  |  |  |
|  | Status about the oculo patient  |  |  |  |  |
|  | Status about the paediatric patient  |  |  |  |  |

**PRE-OPERATIVE ASSESSMENT FOR CATARACT PATIENTS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Cataract grading (Nuclear/Cortical/PSC/Mature ) documented |  |  |  |  |
|  | Keratometer calibrated after every 20 patients |  |  |  |  |
|  | Keratometry done in all patients |  |  |  |  |
|  | Type of keratometry-Manual/Auto/Both |  |  |  |  |
|  | Biometry done for all patients |  |  |  |  |
|  | Method of Biometry (Applanation/ Immersion/ Optical) |  |  |  |  |
|  | Minimum of ten axial length reading measurements taken |  |  |  |  |
|  | Syringing done for all cataract patients |  |  |  |  |
|  | After syringing antibiotic drops to be given to every patient |  |  |  |  |
|  | Syringing done on the day of surgery  |  |  |  |  |
|  | Syringing done at least 24 hours before surgery |  |  |  |  |
|  | Contact procedures like applanation tonometry, Gonioscopy contact biometry done on day of surgery |  |  |  |  |
|  | Contact procedures like applanation tonometry, Gonioscopy, contact biometry done at least 24 hours before surgery |  |  |  |  |
|  | BP RBS Urine Sugar ELISA for HIVHBs AgECG |  |  |  |  |
|  | BP < 140/90 taken as standard for all cataract surgery patients |  |  |  |  |
|  | RBS < 180 as standard for all cataract surgery patients |  |  |  |  |
|  | Doctor fitness after pre operative tests according to standard parameters  |  |  |  |  |

**IN PATIENT DEPARTMENT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Are oral anti diabetic drugs omitted on day of surgery |  |  |  |  |
|  | Is insulin omitted on day of surgery for cataract patient’s |  |  |  |  |
|  | Is Xylocaine allergic testing done? |  |  |  |  |
|  | Pre-operative topical antibiotics started 24 hours before surgery |  |  |  |  |
|  | Pre-operative oral antibiotics in high risk patients like Diabetics /immune compromised patients |  |  |  |  |
|  | Do you stop anti-coagulants atleast 2 days before posting for cataract surgery |  |  |  |  |
|  | Trimming of eyelashes |  |  |  |  |
|  | Are patients instructed to wash their hair and face on the day of surgery? |  |  |  |  |
|  | Do all high-risk patients have IV line inserted before being shifted to OT? |  |  |  |  |
|  | Is the eye to be operated marked with a sticker? |  |  |  |  |
|  | Are separate colour stickers available for right and left eye? |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Pre-anaesthetic Check-up( PAC ) done in all patients |  |  |  |  |
|  | Pre-operative Acetazolamide given to all patients |  |  |  |  |
|  | Pre-operative NSAIDs used for maintaining pupillary dilatation |  |  |  |  |
|  | Conjunctival swab for one-eyed /post DCR patients |  |  |  |  |
|  | Pre-operative checklist with biometry, IOP, Syringing, BP, RBS, and IOL power checked and signed by doctor |  |  |  |  |

**POST-OPERATIVE**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Protocol of eye cleaning after opening patch |  |  |  |  |
|  | All patients dilated post-op |  |  |  |  |
|  | Visual acuity documented with Pin Hole |  |  |  |  |
|  | Post -op IOP measurement with NCT |  |  |  |  |
|  | Slit lamp findings documented |  |  |  |  |
|  | Topical antibiotics given for 4 weeks/one week |  |  |  |  |
|  | Topical steroids given on a tapering schedule for a minimum of 4-6 weeks |  |  |  |  |
|  | Oral antibiotics given to all patients |  |  |  |  |
|  | Cycloplegics given to all patients |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Protective dark glasses given  |  |  |  |  |
|  | Discharge summary given to all patients |  |  |  |  |
|  | Discharge summary has IOL sticker pasted on it |  |  |  |  |
|  | Eye cleaning procedure explained to patient |  |  |  |  |
|  | Post -operative follow up done in accordance with NPCB norms at Day1, Day 2, one week and One Month |  |  |  |  |
|  | Post-operative complications documented |  |  |  |  |
|  | Spectacles prescribed at 4- 6 weeks |  |  |  |  |
|  | Method of opening eye drops explained to patient |  |  |  |  |