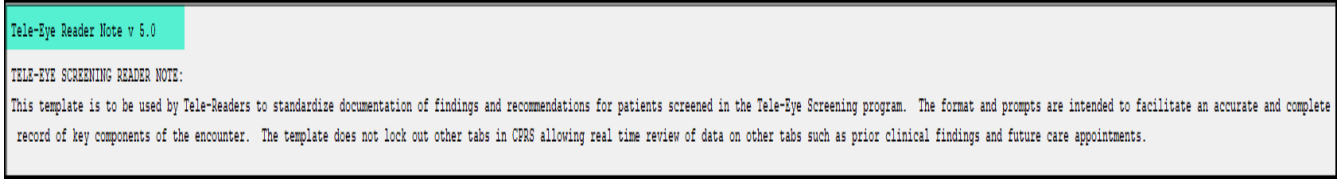
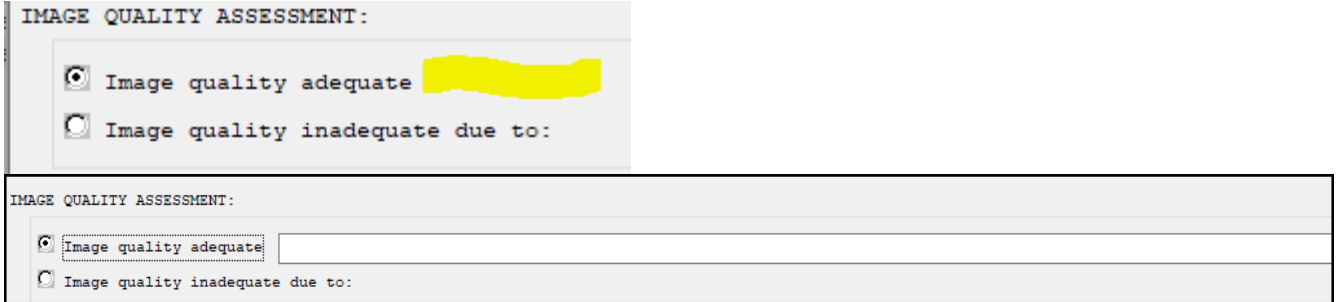


TELE-EYE READER NOTE

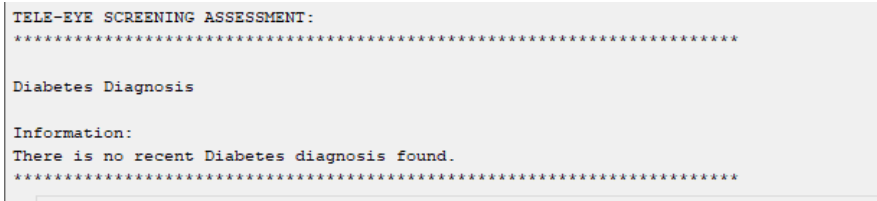
1. Change version from 4.0 to 5.1



2. Add optional comment box after 'Image Quality Adequate' selection



3. Reader template same patient---does not show the Macular Degeneration risk factor:



Added data objects for Glaucoma Risk and AMD Risk

- |VA-AMD RISK FACTORS|
- |VA-GLAUCOMA RISK FACTORS|

TELE-EYE SCREENING ASSESSMENT:

Diabetes Diagnosis

Information:

Encounter Diagnosis:

04/01/2017@17:59 O24.415 (ICD-10-CM) Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs rank: PRIMARY
Prov. Narr. - Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs

Glaucoma Risk Factors

Information:

Encounter Diagnosis:

05/08/2019@10:20:39 H40.033 (ICD-10-CM) Anatomical Narrow Angle, Bilateral rank: PRIMARY
Prov. Narr. - Anatomical Narrow Angle, Bilateral

Macular Degeneration Risk Factors

Information:

The patient has no AMD risk factors

- Diabetic
- Non-Diabetic Patient

4. Add a unique health factor to each of the Type 1 and Type 2:

- Diabetic
- Type 1
- Type 2
- Non-Diabetic Patient

New health factors created:

- VA-TRR DIABETES TYPE 1
- VA-TRR DIABETES TYPE 2

5. For 'Non-Diabetic Patient' selection, expand to new elements, a required selection of one; add HF for each selection

- 0 At-Risk for Macular Degeneration
- 0 At-Risk for Glaucoma
- 0 At-Risk for Macular Degeneration and Glaucoma
- 0 Other:

New Health Factors:

- VA-TRR AT RISK FOR GLAUCOMA
- VA-TRR AT RISK FOR MAC DEGEN & GLAUCOMA

- VA-TRR AT RISK FOR MAC DEGENERATION
- VA-TRR AT RISK OTHER EYE CONDITION

Non-Diabetic Patient:

Risk Factors:

- At-Risk for Macular Degeneration
- At-Risk for Glaucoma
- At-Risk for Macular Degeneration and Glaucoma
- Other:

ASSESSMENT SECTION: Modify each sub-sections as outlined below, will be same across Type 1, Type 2, and Non-Diabetic categories (except there is one element that only pertains to the diabetic groups); also these will need to apply to both right and left eye reviews. Add HFs for each. I identified the new options in red and below is preferred arrangement; also provided the autocode ICDs with appropriate Right vs Left eye ICD where needed:

Diabetic Retinopathy

6. Type 1
 - a. Right
 - b. Left

Evidence of previous retinal laser treatment

Retinopathy

- Mild Nonproliferative
- Moderate Nonproliferative
- Severe Nonproliferative
- Proliferative Retinopathy

Evidence of previous retinal laser treatment

7. Type 2
 - a. Right
 - b. Left

add optional comment box to this selection

Evidence of previous retinal laser treatment

Retinopathy

- Mild Nonproliferative
- Moderate Nonproliferative
- Severe Nonproliferative
- Proliferative Retinopathy

Evidence of previous retinal laser treatment:

Macula Assessment

Right Eye Findings: <add new elements, arrange in this order>

8. Macular pigmentary changes < add optional comment box, no autocode needed>

Health Factor:

- VA-TRR MAC FINDING PIGMENTARY CHANGE RT

Macular Pigmentary Changes:

9. Drusen < add optional comment box, autocode: Right eye ICD H35.361

Health Factor:

- VA-TRR MAC FINDING DRUSEN RT

Taxonomy:

- VA-TRR MACULAR DRUSEN RT

Drusen:

10. Microaneurysm(s)/Intraretinal hemorrhage(s) <add optional comment box, no autocode needed >

Health Factor:

- VA-TRR MAC FINDING INTRARETINAL HEMORRHAGE RT

Microaneurysm(s)/Intraretinal Hemorrhage(s):

11. Exudates <add optional comment box, no autocode needed >

Health Factor:

- VA-TRR MAC FINDING EXUDATES RT

Exudates:

12. Macular Hole/Pseudohole < add optional comment box, autocode: Right eye ICD H35.341

Health Factor:

- VA-TRR MAC FINDING MAC HOLE-RT

Taxonomy:

- VA-TRR MACULAR HOLE RT

Macular Hole/Pseudohole:

13. Macular atrophy/scar <add optional comment box, with encounter autocode: Right eye ICD H31.011

Health Factor:

- VA-TRR MAC FINDING ATROPHY RT

Taxonomy:

- VA-TRR MACULAR ATROPHY RT

Macular Atrophy/Scar:

Left Eye Findings: <add new elements, arrange in this order>

14. Macular pigmentary changes < add optional comment box, no autocode needed>

Health Factor:

- VA-TRR MAC FINDING PIGMENTARY CHANGE LT

<input checked="" type="checkbox"/> Macular Pigmentary Changes	
--	--

15. Drusen < add optional comment box, autocode: Left eye ICD H35.362>

Health Factor:

- VA-TRR MAC FINDING DRUSEN LT

Taxonomy:

- VA-TRR MACULAR DRUSEN LT

<input checked="" type="checkbox"/> Drusen	
--	--

16. Microaneurysm(s)/Intraretinal hemorrhage(s) <add optional comment box, no autocode needed >

Health Factor:

- VA-TRR MAC FINDING INTRARETINAL HEMORRHAGE LT

<input checked="" type="checkbox"/> Microaneurysm(s)/Intraretinal Hemorrhage(s)	
---	--

17. Exudates <add optional comment box, no autocode needed >

Health Factor:

- VA-TRR MAC FINDING EXUDATES LT

<input checked="" type="checkbox"/> Exudates	
--	--

18. Macular Hole/Pseudohole < add optional comment box, autocode: Left eye ICD H35.342

Health Factor:

- VA-TRR MAC FINDING MAC HOLE-LT

Taxonomy:

- VA-TRR MACULAR HOLE LT

<input checked="" type="checkbox"/> Macular Hole/Pseudohole	
---	--

19. Macular atrophy/scar <add optional comment box, with encounter autocode: Left eye ICD H31.012

Health Factor:

- VA-TRR MAC FINDING ATROPHY LT

Taxonomy:

- VA-TRR MACULAR ATROPHY LT

<input checked="" type="checkbox"/> Macular Atrophy/Scar	
--	--

Optic Nerve Assessment

Right Eye Findings:

20. Peripapillary atrophy: < no autocode ICD needed>

a. **Health Factor:**

- VA-TRR ON FINDING PERIPAPILLARY ATROPHY RT

<input checked="" type="checkbox"/> Peripapillary Atrophy	
---	--

21. Glaucoma Suspect: Based on appearance of optic disc: < include optional comment box, expand to new sub-selects below;; include optional comment box to the right of each sub-select option>
- Large cup-disc ratio < optional comment box>
 - Asymmetric cupping- greater than fellow eye < optional comment box>
 - Thinning/Notching of neuro-retinal rim < optional comment box>
 - Nerve fiber layer defect < optional comment box>

<input checked="" type="checkbox"/>	Glaucoma Suspect: Based on appearance of optic disc	
<input checked="" type="checkbox"/>	Large Cup-Disc Ratio	<input type="text"/>
<input checked="" type="checkbox"/>	Asymmetric Cupping-Greater Than Fellow Eye	<input type="text"/>
<input checked="" type="checkbox"/>	Thinning/Notching of Neuro-Retinal Rim	<input type="text"/>
<input checked="" type="checkbox"/>	Nerve Fiber Layer Defect	<input type="text"/>

22. Physiologic cupping suspected – neuro-retinal rim and nerve fiber layer appear intact <no autocode>

a. **Health Factor:**

VA-TRR ON FINDING PHYSIOLOGIC CUPPING SUSPECTED RT

<input checked="" type="checkbox"/>	Physiologic Cupping Suspected	<input type="text"/>
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23. Known Glaucoma <autocode: ICD h40.9 is same code for either eye

a. **Health Factor:**

VA-TRR ON FINDING KNOWN GLAUCOMA RT

b. **Taxonomy:**

VA-TRR ON KNOWN GLAUCOMA

<input checked="" type="checkbox"/>	Known Glaucoma	<input type="text"/>
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24. Disc drusen: < autocode Right eye ICD H47.321 >

a. **Health Factor:**

VA-TRR ON FINDING DISC DRUSEN RT

b. **Taxonomy:**

VA-TRR ON DISC DRUSEN RT

<input checked="" type="checkbox"/>	Disc Drusen	<input type="text"/>
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25. Crowded disc with sharp margins < no autocode ICD needed >

a. **Health Factor:**

VA-TRR ON FINDING DISC W/ SHARP MARGINS RT

<input checked="" type="checkbox"/>	Crowded Disc with Sharp Margins	<input type="text"/>
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26. Disc neovascularization: < autocode: Right eye ICD H47.091 >

a. **Health Factor:**

VA-TRR ON FINDING DISC NEOVASCULARIZATION RT

b. **Taxonomy:**

VA-TRR ON DISC NEOVASCULARIZATION RT

<input checked="" type="checkbox"/>	Disc Neovascularization	Comment: <input type="text"/>
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27. Disc edema suspected: < autocode: Right eye ICD H47.091 >

- a. **Health Factor:**
VA-TRR ON FINDING DISC EDEMA SUSP RT
- b. **Taxonomy:**
VA-TRR ON DISC EDEMA SUSPECT RT

<input checked="" type="checkbox"/> Disc Edema Suspected	
--	--

28. Papilledema suspected < autocode: ICD H47.10 *is same code for either eye*

- a. **Health Factor:**
VA-TRR ON FINDING PAPILLEDEMA SUSPECTED RT
- b. **Taxonomy:**
VA-TRR ON PAPILLEDEMA SUSPECT

<input checked="" type="checkbox"/> Papilledema Suspected	
---	--

29. Pallor: < autocode: Right eye ICD H47.091 >

- a. **Health Factor:**
VA-TRR ON FINDING PALLOR RT
- b. **Taxonomy:**
VA-TRR ON PALLOR RT

<input checked="" type="checkbox"/> Pallor	
--	--

30. Remove 'Elevated IOP' from this Optic Nerve Head section, will place in the following 'Other Assessment' section

Optic Nerve Head Assessment:	
<input type="radio"/> No apparent abnormalities	
<input checked="" type="radio"/> Findings:	
<input type="checkbox"/> Peripapillary Atrophy	
<input type="checkbox"/> Glaucoma Suspect: Based on appearance of optic disc	
<input type="checkbox"/> Physiologic Cupping Suspected	
<input type="checkbox"/> Known Glaucoma	
<input type="checkbox"/> Disc Drusen	
<input type="checkbox"/> Crowded Disc with Sharp Margins	
<input type="checkbox"/> Disc Neovascularization	
<input type="checkbox"/> Disc Edema Suspected	
<input type="checkbox"/> Papilledema Suspected	
<input type="checkbox"/> Pallor	
<input type="checkbox"/> Other:	

Left Eye Findings:

31. Peripapillary atrophy: < no autocode ICD needed>

a. Health Factor:

VA-TRR ON FINDING PERIPAPILLARY ATROPHY LT

<input checked="" type="checkbox"/> Peripapillary Atrophy	
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32. Glaucoma Suspect: Based on appearance of optic disc: < include optional comment box, expand to new sub-selects below,; include optional comment box to the right of each sub-select option>

- Large cup-disc ratio < optional comment box>
- Asymmetric cupping- greater than fellow eye < optional comment box>
- Thinning/Notching of neuro-retinal rim < optional comment box>
- Nerve fiber layer defect < optional comment box>

<input checked="" type="checkbox"/> Glaucoma Suspect: Based on appearance of optic disc	
<input checked="" type="checkbox"/> Large Cup-Disc Ratio	
<input checked="" type="checkbox"/> Asymmetric Cupping-Greater Than Fellow Eye	
<input checked="" type="checkbox"/> Thinning/Notching of Neuro-Retinal Rim	
<input checked="" type="checkbox"/> Nerve Fiber Layer Defect	

33. Physiologic cupping suspected – neuro-retinal rim and nerve fiber layer appear intact <no autocode>

a. Health Factor:

VA-TRR ON FINDING PHYSIOLOGIC CUPPING SUSPECTED LT

<input checked="" type="checkbox"/> Physiologic Cupping Suspected	
---	--

34. Known Glaucoma <autocode: ICD h40.9 is same code for either eye

a. Health Factor:

VA-TRR ON FINDING KNOWN GLAUCOMA LT

b. Taxonomy:

VA-TRR ON KNOWN GLAUCOMA

<input checked="" type="checkbox"/> Known Glaucoma	
--	--

35. Disc drusen: < autocode Left eye ICD H47.322

a. Health Factor:

VA-TRR ON FINDING DISC DRUSEN LT

b. Taxonomy:

VA-TRR ON DISC DRUSEN LT

<input checked="" type="checkbox"/> Disc Drusen	
---	--

36. Crowded disc with sharp margins < no autocode ICD needed >

a. Health Factor:

VA-TRR ON FINDING DISC W/ SHARP MARGINS LT

<input checked="" type="checkbox"/> Crowded Disc with Sharp Margins	
---	--

37. Disc neovascularization: < autocode: Left eye ICD H47.092>
- a. Health Factor:
VA-TRR ON FINDING DISC NEOVASCULARIZATION LT
 - b. Taxonomy:
VA-TRR ON DISC NEOVASCULARIZATION LT

<input checked="" type="checkbox"/> Disc Neovascularization	Comment:	
---	----------	--

38. Disc edema suspected: < autocode: Left eye ICD H47.092>
- a. Health Factor:
VA-TRR ON FINDING DISC EDEMA SUSP LT
 - b. Taxonomy:
VA-TRR ON DISC EDEMA SUSPECT LT

<input checked="" type="checkbox"/> Disc Edema Suspected	
--	--

39. Papilledema suspected < autocode: ICD H47.10 *is same code for either eye*
- a. Health Factor:
VA-TRR ON FINDING PAPILLEDEMA SUSPECTED LT
 - b. Taxonomy:
VA-TRR ON PAPILLEDEMA SUSPECT

<input checked="" type="checkbox"/> Papilledema Suspected	
---	--

40. Pallor: < autocode: Left eye ICD H47.092>
- a. Health Factor:
VA-TRR ON FINDING PALLOR LT
 - b. Taxonomy:
VA-TRR ON PALLOR LT

<input checked="" type="checkbox"/> Pallor	
--	--

41. Remove 'Elevated IOP' from this Optic Nerve Head section, will place in the following 'Other Assessment' section

Optic Nerve Head Assessment:

No apparent abnormalities

Findings:

Peripapillary Atrophy

Glaucoma Suspect: Based on appearance of optic disc

Physiologic Cupping Suspected

Known Glaucoma

Disc Drusen

Crowded Disc with Sharp Margins

Disc Neovascularization

Disc Edema Suspected

Papilledema Suspected

Pallor

Other:

Other Assessment

Right Eye

42. Posterior Intraocular Lens Implant <autocode ICD Z96.1 (generic code is same regardless of R/L eye)>

a. **Health Factor:**

VA-TRR OTH ASSESS FINDING LENS IMPLANT RT

b. **Taxonomy:**

VA-TRR POSTERIOR IO LENS IMPLANT

Posterior Intraocular Lens Implant

43. Lenticular opacification – appears age-appropriate < autocode: Right eye ICD H25.091>

a. **Health Factor:**

VA-TRR OTH ASSESS FINDING LENTICULAR OPACIFICATION RT

b. **Taxonomy:**

VA-TRR LENTICULAR OPACIFICATION RT

Lenticular Opacification - Appears Age-Appropriate

44. Cataract – visual significance suspected < change autocode: Right eye ICD H25.811>

Diagnoses: **Combined Forms of Age-Related Cataract, right Eye (ICD-10-CM H25.811)**

45. Add Cataract – Known Condition

Cataract - Known Condition

Comment:

46. Chorioretinal scar <autocode right eye H31.001>

- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING CHORIORETINAL SCAR RT
- b. **Taxonomy:**
VA-TRR CHORIORETINAL SCAR RT

<input checked="" type="checkbox"/>	Chorioretinal Scar	
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47. Retinal vascular changes < right eye H35.011
- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING RETINAL VASC CHANGE RT
 - b. **Taxonomy:**
VA-TRR RETINAL VASCULAR CHANGE RT

<input checked="" type="checkbox"/>	Retinal Vascular Changes	
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48. Cotton wool spot(s) < autocode H35.82> *same code for either eye, it is an 'unspecified' code*
- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING COTTON WOOL SPOT RT
 - b. **Taxonomy:**
VA-TRR COTTON WOOL SPOT

<input checked="" type="checkbox"/>	Cotton Wool Spot(s)	Comment: <input style="width: 95%;" type="text"/>
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49. Peripheral Retinal Degeneration <autocode ICD H35.40 same regardless of eye >
- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING PERIPH RET DEGEN RT
 - b. **Taxonomy:**
VA-TRR PERIPHERAL RETINAL DEGENERATION

<input checked="" type="checkbox"/>	Peripheral Retinal Degeneration	Comment: <input style="width: 95%;" type="text"/>
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50. Elevated Intraocular Pressure (>21 mmHg) < autocode right eye H40.051>
- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING ELEVATED IOP RT
 - b. **Taxonomy:**
VA-TRR ELEVATED IOP RT

<input checked="" type="checkbox"/>	Elevated IOP	
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51. Family history of glaucoma < autocode ICD Z83.511 - this is non-specific, so same code for either eye)
- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING FAMILY HX GLAUCOMA RT
 - b. **Taxonomy:**
VA-TRR FAMILY HX OF GLAUCOMA

Family History of Glaucoma Comment:

Left Eye

52. Posterior Intraocular Lens Implant <autocode ICD Z96.1 (generic code is same regardless of R/L eye)

a. Health Factor:

VA-TRR OTH ASSESS FINDING LENS IMPLANT LT

b. Taxonomy:

VA-TRR POSTERIOR IO LENS IMPLANT

Posterior Intraocular Lens Implant

53. Lenticular opacification – appears age-appropriate < autocode: Left eye H25.092

a. Health Factor:

VA-TRR OTH ASSESS FINDING LENTICULAR OPACIFICATION LT

b. Taxonomy:

VA-TRR LENTICULAR OPACIFICATION LT

Lenticular Opacification - Appears Age-Appropriate

54. Cataract — visual significance suspected < **change** autocode: Left eye H25.812

Diagnoses: Combined Forms of Age-Related Cataract, left Eye (ICD-10-CM H25.812)

55. Add Cataract – Known Condition

Cataract - Known Condition
Comment:

56. Chorioretinal scar <autocode left eye H31.002>

a. Health Factor:

VA-TRR OTH ASSESS FINDING CHORIORETINAL SCAR LT

b. Taxonomy:

VA-TRR CATARACT LT

Chorioretinal Scar

57. Retinal vascular changes < left eye H35.012>

a. Health Factor:

VA-TRR OTH ASSESS FINDING RETINAL VASC CHANGE LT

b. Taxonomy:

VA-TRR RETINAL VASCULAR CHANGE LT

Retinal Vascular Changes:

58. Cotton wool spot(s) < autocode H35.82> same code for either eye, it is an 'unspecified' code

a. Health Factor:

VA-TRR OTH ASSESS FINDING COTTON WOOL SPOT LT

b. Taxonomy:

VA-TRR COTTON WOOL SPOT

Cotton Wool Spot(s) Comment:

59. Peripheral Retinal Degeneration <autocode ICD H35.40 same regardless of eye >

- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING PERIPH RET DEGEN LT
- b. **Taxonomy:**
VA-TRR PERIPHERAL RETINAL DEGENERATION

Peripheral Retinal Degeneration Comment:

60. Elevated Intraocular Pressure (>21 mmHg) < autocode left eye H40.052

- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING ELEVATED IOP LT
- b. **Taxonomy:**
VA-TRR CATARACT LT

Elevated IOP

61. Family history of glaucoma < autocode ICD Z83.511 - this is non-specific, so same code for either eye)

- a. **Health Factor:**
VA-TRR OTH ASSESS FINDING FAMILY HX GLAUCOMA LT
- b. **Taxonomy:**
VA-TRR FAMILY HX OF GLAUCOMA

Family History of Glaucoma Comment:

62. Create new Oct Assesment Group

Diabetic

Non-Diabetic Patient:

OCT ASSESSMENT:

RECOMMENDATIONS:

OCT ASSESSMENT:

Scan Quality/Reliability:

Reliable

Unreliable

MACULAR OCT ASSESSMENT:

DISC/RNFL OCT ASSESSMENT:

Additional comments (optional):

63. Oct Assessment Group
 a. Add Quality Group

Scan Quality/Reliability:

Reliable

Unreliable

64. Oct Assessment Group
 a. Add Macular Oct Assessment group
 i. Add OD/OS/OU to each selection

MACULAR OCT ASSESSMENT:

Normal Macular Structure

Abnormal Finding(s):

Drusen: * OD OS OU Comment:

Epiretinal Membrane: * OD OS OU Comment:

Macular Edema/Intraretinal Fluid: * OD OS OU Comment:

Pseudohole/Lamellar Hole: * OD OS OU Comment:

Macular Hole: * OD OS OU Comment:

Choroidal Neovascular Membrane: * OD OS OU Comment:

Subretinal Fluid: * OD OS OU Comment:

Abnormal Ganglion Cell Complex (GCC) Comment:

Other: * OD OS OU *

65. Macular OCT Assessment
 a. Add 3rd option Scan quality not adequate to determine w/ comment box

MACULAR OCT ASSESSMENT:

Normal Macular Structure

Abnormal Finding(s):

Scan Quality Not Adequate to Determine

66. Macular OCT Assessment>Abnormal
 a. Add selection for Artifactual defect(s) noted w/ comment box

MACULAR OCT ASSESSMENT:

Normal Macular Structure

Abnormal Finding(s):

Drusen: * OD OS OU

Epiretinal Membrane: * OD OS OU

Macular Edema/Intraretinal Fluid: * OD OS OU

Pseudohole/Lamellar Hole: * OD OS OU

Macular Hole: * OD OS OU

Choroidal Neovascular Membrane: * OD OS OU

Subretinal Fluid: * OD OS OU

Abnormal Ganglion Cell Complex (GCC)

Artifactual defect(s) noted Comment:

Other: * OD OS OU

67. Disc/RNFL OCT Assessment

- a. Add 3rd option Scan quality not adequate to determine w/ comment box

DISC/RNFL OCT ASSESSMENT:

Normal compared to reference database

Abnormal Finding(s):

Scan Quality Not Adequate to Determine Comment:

68. Disc/RNFL OCT Assessment>Abnormal

- a. Add selection for Artifactual defect(s) noted w/ comment box

DISC/RNFL OCT ASSESSMENT:

Normal compared to reference database

Abnormal Finding(s):

RNFL Thinning Present:

GCL/IPL Thinning: * OD OS OU

Artifactual defect(s) noted Comment:

Other:

69. Disc/RNFL OCT Assessment>Abnormal>RNFL Thinning Present

- a. Change to one or more selections required

DISC/RNFL OCT ASSESSMENT:

Normal compared to reference database

Abnormal Finding(s):

RNFL Thinning Present:

Inferior: * OD OS OU

Superior: * OD OS OU

Nasal: * OD OS OU

Temporal: * OD OS OU

70. Disc/RNFL OCT Assessment>Abnormal>GCL/IPL Thinning section
 a. Add selections for Inferior, Superior, Nasal, and Temporal

DISC/RNFL OCT ASSESSMENT:

Normal compared to reference database

Abnormal Finding(s):

RNFL Thinning Present:

GCL/IPL Thinning:

Inferior: * OD OS OU

Superior: * OD OS OU

Nasal: * OD OS OU

Temporal: * OD OS OU

71. Oct Assessment Group
 a. Add Disc/RNFL Oct Assessment group
 i. Add OD/OS/OU to each selection

DISC/RNFL OCT ASSESSMENT:

Normal compared to reference database

Abnormal Finding(s):

RNFL Thinning Present:

Inferior: * OD OS OU

Superior: * OD OS OU

Nasal: * OD OS OU

Temporal: * OD OS OU

GCL/IPL Thinning: * OD OS OU Comment:

Other:

Avg RNFL (um): * OD OS OU

Avg CDR: * OD OS OU

Vert CDR: * OD OS OU

EYE SCREENING RESULTS SECTION

72. Edit verbiage in RD template
 a. Macular Findings-Change to Macular Degeneration

Macula Degeneration:

Normal

Abnormal

Unable to Assess

73. Edit verbiage in **RD template**

- a. Optic Nerve Head Findings-Change to Glaucoma

Glaucoma:

Normal

Abnormal

Unable to Assess

74. Edit verbiage so that when applies to note, reads as below (you just did this for the Imager template):

Diabetic Retinopathy: Normal - No Diabetic Retinopathy Apparent
 Macula: Normal - **Age appropriate findings**
 Optic Nerve: Normal - **Age appropriate findings**
 Other Assessment: Normal - **Age appropriate findings**

EYE SCREENING RESULTS:

Macula: Normal - Age appropriate findings
 Optic Nerve Head: Normal - Age appropriate findings
 Other Assessment: Normal - Age appropriate findings

75. Diabetes

- a. Edit verbiage in Progress note
- i. Diabetic Retinopathy Normal
1. Diabetic Retinopathy: Normal - No diabetic retinopathy apparent

EYE SCREENING RESULTS:

Diabetic Retinopathy: Normal - No diabetic retinopathy apparent

76. Diabetes

- a. Edit verbiage in Progress note
- i. Diabetic Retinopathy Abnormal
1. ABNORMAL - DIABETIC RETINOPATHY PRESENT

EYE SCREENING RESULTS:

Diabetic Retinopathy: ABNORMAL - DIABETIC RETINOPATHY PRESENT

77. Diabetic Retinopathy Exam Normal

- a. Change HF print name to No diabetic retinopathy apparent

78. Diabetic Retinopathy Exam Abnormal

- a. Change HF print name to ***DIABETIC RETINOPATHY DETECTED***

79. Macular Degeneration

- a. Edit Verbiage in Progress Note

- i. Macular Degeneration Normal
 - 1. Normal – No signs of macular degeneration

EYE SCREENING RESULTS:

Macula: Normal - No signs of macular degeneration

- 80. Macular Degeneration
 - a. Edit verbiage in Progress Note
 - i. Macular Degeneration Normal
 - 1. Normal - No macular degeneration apparent

EYE SCREENING RESULTS:

Macula: Normal - No macular degeneration apparent

- 81. Macular Degeneration
 - a. Edit Verbiage in Progress Note
 - i. Macular Degeneration Abnormal
 - 1. ABNORMAL – FURTHER ASSESSMENT NEEDED

EYE SCREENING RESULTS:

Macula: ABNORMAL - FURTHER ASSESSMENT NEEDED

- 82. Macular Degeneration Exam Normal
 - a. Change HF print name to No signs of macular degeneration

- 83. Macular Degeneration Exam Normal
 - a. Change HF print name to No macular degeneration apparent

- 84. Macular Degeneration Exam Abnormal
 - a. Change HF print name to *FURTHER ASSESSMENT NEEDED FOR MACULAR DEGENERATION*

- 85. Glaucoma
 - a. Edit Verbiage in Progress Note
 - i. Glaucoma Normal
 - 1. Normal – No signs of glaucomatous nerve damage

EYE SCREENING RESULTS:

Glaucoma: Normal - No signs of glaucomatous nerve damage

- 86. Glaucoma
 - a. Edit verbiage in Progress Note
 - i. Glaucoma Normal
 - 1. Normal – No glaucomatous nerve damage apparent

EYE SCREENING RESULTS:

Glaucoma: Normal - No glaucomatous nerve damage apparent

- 87. Glaucoma
 - a. Edit verbiage in progress note
 - i. Glaucoma Abnormal
 - 1. ABNORMAL – FURTHER ASSESSMENT NEEDED

EYE SCREENING RESULTS:
Glaucoma: ABNORMAL - FURTHER ASSESSMENT NEEDED

- 88. Glaucoma Exam Normal
 - a. Change HF print name to No signs of glaucoma nerve damage
- 89. Glaucoma Exam Normal
 - a. Change HF print name to No glaucoma apparent
- 90. Glaucoma Exam Abnormal
 - a. Change HF print name to * FURTHER ASSESSMENT NEEDED FOR GLAUCOMA*
- 91. Other Assessment Findings
 - a. Change to Other Time-Sensitive Findings

Other Time-Sensitive Findings:

- 92. Other Assessment
 - a. Edit verbiage in progress note
 - i. Normal
 - 1. Normal – No other time-critical findings

EYE SCREENING RESULTS:
Other Assessment: Normal - No other time-critical findings

- 93. Other Time-Sensitive Findings
 - a. Edit verbiage in progress note
 - i. Normal
 - 1. Normal – No other time-sensitive findings

EYE SCREENING RESULTS:
Other Findings : Normal - No other time-sensitive findings

- 94. Other Time-Sensitive Findings
 - a. Edit verbiage in progress note
 - i. Other Findings

EYE SCREENING RESULTS:
Other Findings :

- 95. Other Assessment
 - a. Edit verbiage in progress note
 - i. Abnormal
 - 1. ABNORMAL – FURTHER ASSESSMENT NEEDED

EYE SCREENING RESULTS:
Other Assessment: ABNORMAL - FURTHER ASSESSMENT NEEDED

- 96. Other Assessment Exam Abnormal

- a. Change HF print name to *FURTHER ASSESSMENT NEEDED FOR OTHER FINDINGS*

97. Other Assessment Exam Normal

- a. Change HF print name to No other time-sensitive findings apparent.

98. Edit verbiage so that when applies to note, reads as below (you just did this for the Imager template):

When '**Abnormal**' is selected on the **Macula, Optic Nerve, or Other Assessment Findings** sections, edit to:

Abnormal – Demonstrates need for follow up care

Macula:	Abnormal	- Demonstrates need for follow up care
Optic Nerve:	Abnormal	- Demonstrates need for follow up care
Other Assessment:	Abnormal	- Demonstrates need for follow up care

EYE SCREENING RESULTS:
 Macula: Abnormal - Demonstrates need for follow up care
 Optic Nerve Head: Abnormal - Demonstrates need for follow up care
 Other Assessment: Abnormal - Demonstrates need for follow up care

99. Edit verbiage so that when applies to note, reads as below

- a. Normal

EYE SCREENING RESULTS:
 Diabetic Retinopathy: Normal - No diabetic retinopathy apparent
 Macula: Normal - No signs of macular degeneration
 Glaucoma: Normal - No signs of glaucomatous nerve damage
 Other Assessment: Normal - No other time-critical findings

100. Edit verbiage so that when applies to note, reads as below

- a. Normal

EYE SCREENING RESULTS:
 Diabetic Retinopathy: Normal - No diabetic retinopathy apparent
 Macula: Normal - No macular degeneration apparent
 Glaucoma: Normal - No glaucomatous nerve damage apparent
 Other Findings : Normal - No other time-sensitive findings

101. Edit verbiage so that when applies to note, reads as below

- a. Abnormal

EYE SCREENING RESULTS:
 Diabetic Retinopathy: ABNORMAL - DIABETIC RETINOPATHY PRESENT
 Macula: ABNORMAL - FURTHER ASSESSMENT NEEDED
 Glaucoma: ABNORMAL - FURTHER ASSESSMENT NEEDED
 Other Assessment: ABNORMAL - FURTHER ASSESSMENT NEEDED

102. Edit verbiage so that when applies to note, reads as below

- a. Abnormal

EYE SCREENING RESULTS:
 Diabetic Retinopathy: ABNORMAL - DIABETIC RETINOPATHY PRESENT
 Macula: ABNORMAL - FURTHER ASSESSMENT NEEDED
 Glaucoma: ABNORMAL - FURTHER ASSESSMENT NEEDED
 Other Findings: ABNORMAL - FURTHER ASSESSMENT NEEDED

103. Edit verbiage so that when applies to note, reads as below
a. Unable to Assess

```
EYE SCREENING RESULTS:  
Diabetic Retinopathy: Unable to Assess  
Macula:                Unable to Assess  
Glaucoma:              Unable to Assess  
Other Assessment:     Unable to Assess
```

104. Edit verbiage so that when applies to note, reads as below
a. Unable to Assess

```
EYE SCREENING RESULTS:  
Diabetic Retinopathy: Unable to Assess  
Macula:                Unable to Assess  
Glaucoma:              Unable to Assess  
Other Findings:       Unable to Assess
```

105. Other Findings
a. Change Normal verbiage to No other time-sensitive findings in dialog text

```
Other Time-Sensitive Findings:  
 No other time-sensitive findings  
 Abnormal - Further assessment needed  
 Unable to Assess
```

106. Other Findings
a. Change Normal verbiage to No other time-sensitive findings in progress note text

```
EYE SCREENING RESULTS:  
Other Findings :    No other time-sensitive findings
```

107. Other Findings:
a. Change Abnormal verbiage to Abnormal – Further assessment needed in dialog text

```
Other Time-Sensitive Findings:  
 No other time-sensitive findings  
 Abnormal - Further assessment needed  
 Unable to Assess
```

RECOMMENDATIONS SECTION

108. Add these 2 new elements in this group (only one option can be selected)

RECOMMENDATIONS:

Repeat imaging appointment:

Refer for comprehensive face-to-face eye exam

RECOMMENDATIONS:

Repeat imaging appointment:

Refer for comprehensive face-to-face eye exam

Veteran to keep future VA Eye Clinic appointment as scheduled

Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommendation is to be seen:

109. **Patient to keep future VA Eye Clinic appointment as scheduled** < add optional comment box; no calendar needed >

Veteran to keep future VA Eye Clinic appointment as scheduled:

110. Add new health factor for keep future VA Eye Clinic appointment as scheduled
 a. Health Factor- **VA-TRR RECOMMEND VA EYE CLINIC APPT**

111. **Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommendation is to be seen:** <add these time options, same as in the 'Refer for comprehensive exam' selection >

As soon as possible - Time Sensitive:

Within 1 month: Mar 13, 2023 ...

Within 2 months: Apr 13, 2023 ...

Within 3 months: May 13, 2023 ...

Within 4 months: Jun 13, 2023 ...

Within 6 months: Aug 13, 2023 ...

Within 9 months: Nov 13, 2023 ...

Within 1 year: Feb 13, 2024 ...

Within 2 years: Feb 12, 2025 ...

Other: ...

112. Veteran intends to follow up...
 a. Remove "within" on each selection

As soon as possible - Time Sensitive

1 month: Mar 23, 2023 ...

2 months: Apr 23, 2023 ...

3 months: May 23, 2023 ...

4 months: Jun 23, 2023 ...

6 months: Aug 23, 2023 ...

9 months: Nov 23, 2023 ...

1 year: Feb 23, 2024 ...

2 years: Feb 22, 2025 ...

Other: ...

113. Veteran intends to follow up...
 a. Remove "Other" selection

<input type="radio"/>	As soon as possible - Time Sensitive
<input type="radio"/>	1 month: Apr 28, 2023 ...
<input type="radio"/>	2 months: May 28, 2023 ...
<input type="radio"/>	3 months: Jun 28, 2023 ...
<input type="radio"/>	4 months: Jul 28, 2023 ...
<input type="radio"/>	6 months: Sep 28, 2023 ...
<input type="radio"/>	9 months: Dec 28, 2023 ...
<input type="radio"/>	1 year: Mar 27, 2024 ...
<input type="radio"/>	2 years: Mar 27, 2025 ...

- 114. Veteran intends to follow up...
 - a. Create HF for ASAP
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV ASAP**

- 115. Veteran intends to follow up...
 - a. Create HF for 1 Month
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 1 MONTH**

- 116. Veteran intends to follow up...
 - a. Create HF for 2 Months
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 2 MONTHS**

- 117. Veteran intends to follow up...
 - a. Create HF for 3 Months
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 3 MONTHS**

- 118. Veteran intends to follow up...
 - a. Create HF for 4 Months
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 4 MONTHS**

- 119. Veteran intends to follow up...
 - a. Create HF for 6 Months
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 6 MONTHS**

- 120. Veteran intends to follow up...
 - a. Create HF for 9 Months
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 9 MONTHS**

- 121. Veteran intends to follow up...
 - a. Create HF for 1 Year
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 1 YR**

- 122. Veteran intends to follow up...
 - a. Create HF for 2 Years
 - i. Health Factor= **VA-TRR REFER OUTSIDE PROV 2 YRS**

123. Within the 'Refer for comprehensive >> Refer to...' section, edit verbiage to 'VA Ophthalmology'; 'VA Optometry'; 'EITHER VA...'

Refer to:

- Ophthalmology
- Optometry
- EITHER Ophthalmology or Optometry

Refer to:

- VA Ophthalmology
- VA Optometry
- EITHER VA Ophthalmology or VA Optometry

Referral/Appointments:

124. Comprehensive FTF
a. VA Ophthalmology
i. Remove "within" from selections

As soon as possible - Time Sensitive

1 month: Mar 23, 2023 ...

2 months: Apr 23, 2023 ...

3 months: May 23, 2023 ...

4 months: Jun 23, 2023 ...

6 months: Aug 23, 2023 ...

9 months: Nov 23, 2023 ...

1 year: Feb 23, 2024 ...

2 years: Feb 22, 2025 ...

Other: ...

125. Comprehensive FTF
a. VA Ophthalmology
i. Remove "Other" option

As soon as possible - Time Sensitive

1 month: Apr 28, 2023 ...

2 months: May 28, 2023 ...

3 months: Jun 28, 2023 ...

4 months: Jul 28, 2023 ...

6 months: Sep 28, 2023 ...

9 months: Dec 28, 2023 ...

1 year: Mar 27, 2024 ...

2 years: Mar 27, 2025 ...

- 126. Comprehensive FTF
 - a. VA Optometry
 - i. Remove “within” from selections

<input type="radio"/>	As soon as possible - Time Sensitive
<input type="radio"/>	1 month: Mar 23, 2023 ...
<input type="radio"/>	2 months: Apr 23, 2023 ...
<input type="radio"/>	3 months: May 23, 2023 ...
<input type="radio"/>	4 months: Jun 23, 2023 ...
<input type="radio"/>	6 months: Aug 23, 2023 ...
<input type="radio"/>	9 months: Nov 23, 2023 ...
<input type="radio"/>	1 year: Feb 23, 2024 ...
<input type="radio"/>	2 years: Feb 22, 2025 ...
<input type="radio"/>	Other: ...

- 127. Comprehensive FTF
 - a. VA Optometry
 - i. Remove “Other”

<input type="radio"/>	As soon as possible - Time Sensitive
<input type="radio"/>	1 month: Apr 28, 2023 ...
<input type="radio"/>	2 months: May 28, 2023 ...
<input type="radio"/>	3 months: Jun 28, 2023 ...
<input type="radio"/>	4 months: Jul 28, 2023 ...
<input type="radio"/>	6 months: Sep 28, 2023 ...
<input type="radio"/>	9 months: Dec 28, 2023 ...
<input type="radio"/>	1 year: Mar 27, 2024 ...
<input type="radio"/>	2 years: Mar 27, 2025 ...

- 128. Comprehensive FTF
 - a. Either VA Ophthalmology or VA Optometry
 - i. Remove “within” from selections

As soon as possible - Time Sensitive

1 month: Mar 23, 2023 ...

2 months: Apr 23, 2023 ...

3 months: May 23, 2023 ...

4 months: Jun 23, 2023 ...

6 months: Aug 23, 2023 ...

9 months: Nov 23, 2023 ...

1 year: Feb 23, 2024 ...

2 years: Feb 22, 2025 ...

Other: ...

129. Comprehensive FTF
- a. Either VA Ophthalmology or VA Optometry
- i. Remove "Other"

As soon as possible - Time Sensitive

1 month: Apr 28, 2023 ...

2 months: May 28, 2023 ...

3 months: Jun 28, 2023 ...

4 months: Jul 28, 2023 ...

6 months: Sep 28, 2023 ...

9 months: Dec 28, 2023 ...

1 year: Mar 27, 2024 ...

2 years: Mar 27, 2025 ...

130. Veteran intends to f/u w/ outside eye provider...
- a. Remove "within" from selections

As soon as possible - Time Sensitive

1 month: Mar 23, 2023 ...

2 months: Apr 23, 2023 ...

3 months: May 23, 2023 ...

4 months: Jun 23, 2023 ...

6 months: Aug 23, 2023 ...

9 months: Nov 23, 2023 ...

1 year: Feb 23, 2024 ...

2 years: Feb 22, 2025 ...

Other: ...

131. Veteran intends to f/u w/ outside eye provider...
 a. Remove "Other" from selection

<input type="radio"/>	As soon as possible - Time Sensitive
<input type="radio"/>	1 month: Apr 28, 2023 ...
<input type="radio"/>	2 months: May 28, 2023 ...
<input type="radio"/>	3 months: Jun 28, 2023 ...
<input type="radio"/>	4 months: Jul 28, 2023 ...
<input type="radio"/>	6 months: Sep 28, 2023 ...
<input type="radio"/>	9 months: Dec 28, 2023 ...
<input type="radio"/>	1 year: Mar 27, 2024 ...
<input type="radio"/>	2 years: Mar 27, 2025 ...

Add optional-select elements to the **Referral/appointment reason** components:

132. Diabetic findings <optional free text box> <add below as optional quick selects>:
 a. Non-proliferative diabetic retinopathy <optional comment box>
 b. Proliferative diabetic retinopathy suspected <optional comment box>
 c. Non-center involved diabetic macular edema suspected <optional comment box>
 d. Center-involved diabetic macular edema suspected <optional comment box>

<input checked="" type="checkbox"/>	Diabetic Findings	<input type="text"/>
<input checked="" type="checkbox"/>	Non-proliferative diabetic retinopathy	<input type="text"/>
<input checked="" type="checkbox"/>	Proliferative diabetic retinopathy suspected	<input type="text"/>
<input checked="" type="checkbox"/>	Non-center involved diabetic macular edema suspected	<input type="text"/>
<input checked="" type="checkbox"/>	Center-involved diabetic macular edema suspected	<input type="text"/>

133. Macular findings <optional free text box> <add below as optional quick selects>:
 a. Dry macular degeneration suspected <optional comment box>
 b. Wet macular degeneration suspected <optional comment box>
 c. Epiretinal membrane suspected <comment box> <optional comment box>

<input checked="" type="checkbox"/>	Macular Findings	<input type="text"/>
<input checked="" type="checkbox"/>	Dry macular degeneration suspected	<input type="text"/>
<input checked="" type="checkbox"/>	Wet macular degeneration suspected	<input type="text"/>
<input checked="" type="checkbox"/>	Epiretinal membrane suspected	<input type="text"/>

134. Optic Nerve findings <optional free text box> <add below as optional quick selects>:
 a. Glaucoma risk assessment recommended - based on appearance of optic disc <optional comment box>
 b. Known history of glaucoma –clinical monitoring is recommended <optional comment box>

<input checked="" type="checkbox"/>	Optic Nerve Findings	<input type="text"/>
<input checked="" type="checkbox"/>	Glaucoma risk assessment recommended based on appearance of optic disc	<input type="text"/>
<input checked="" type="checkbox"/>	Known history of glaucoma - clinical monitoring is recommended	<input type="text"/>

135. **Retinal arteriolar embolus/plaque** <optional free text box> <add below as optional quick selects>
 (**this item is new, place after the 'Visually Significant cataract suspected' selection)
- Recommend PCP order carotid ultrasound, CBC with lipid panel, echocardiogram and/or other testing as necessary to investigate source.
 - PCP added as additional signer
 - Veteran should be contacted and educated to seek care urgently if experiences signs/symptoms of stroke: Paralysis or numbness or inability to move parts of the face, arm, or leg; confusion- including trouble with speaking; headache with vomiting; trouble seeing in one or both eyes; metallic taste in mouth; difficulty in swallowing; trouble in walking or impaired coordination.

Retinal Arteriolar Embolus/Plaque Comment:
 Recommend PCP order carotid ultrasound, CBC with lipid panel, echocardiogram and/or other testing as necessary to investigate source
 PCP added as additional signer
 Veteran should be contacted and educated to seek care urgently if experiencing signs/symptoms of stroke:

- Paralysis or numbness or inability to move parts of the face, arm, or leg
- Confusion- including trouble with speaking
- Headache with vomiting
- Trouble seeing in one or both eyes
- Metallic taste in mouth
- Difficulty in swallowing
- Trouble in walking or impaired coordination

136. In highlighted area, create new optional selects in order below, moving the 'Veteran is not a candidate....' out from the Referral section to be within this grouping (keep same HF) Place in Recommendation group.

Referral/appointment reason:

- Comprehensive eye exam recommended for next eye care visit
- Diabetic findings
- Macular findings
- Optic Nerve findings
- Visually significant cataract suspected
- Unable to assess eye screening
- Other findings

Veteran is not a candidate for future eye screening.

Additional comments (optional):

Here is the grouping order of the optional selects:

- Tele-Eye Screening is recommended to supplement outside eye care. <include the same dropdown return options as in the 'Repeat imaging appointment' section>

- Return to Imaging -
- Return 1 year
- Return 2 years per EPRP (External Peer Review Program)
- Other:

- Recommend outside eye records be sent to VA for upload and reminder processing. If a VA eye clinic appointment is desired in future, Veteran can request through Direct Scheduling or Primary Care as appropriate.
- Veteran is not a candidate for future eye screening. < add optional comment box, keep same HF as before>
- Record indicates Veteran is a current smoker. Smoking cessation is recommended to reduce risk to ocular and overall health. VA provides smoking cessation services. Veteran can discuss with primary care team for more information.
- Recommend referral to VA Nutrition and Food Services (NFS) for education on positive nutritional habits and therapy to encourage disease prevention and management < add optional comment box>

Additional comments (optional):

RECOMMENDATIONS:

Repeat imaging appointment:

Refer for comprehensive face-to-face eye exam

Veteran to keep future VA Eye Clinic appointments as scheduled

Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommendation is to be seen:

Tele-Eye Screening is recommended to supplement outside eye care.

Return to Imaging - [REDACTED]

Return 1 year

Return 2 years per EPP (External Peer Review Program)

Other:

Recommend outside eye records be sent to VA for upload and reminder processing. If a VA eye clinic appointment is desired in the future, Veteran can request through Direct Scheduling or Primary Care as appropriate.

Veteran is not a candidate for future eye screening: [REDACTED]

Record indicates Veteran is a current tobacco user. Tobacco cessation is recommended to reduce risk to ocular and overall health. VA provides tobacco cessation services. Veteran can discuss with primary care team for more information.

Recommend referral to VA Nutrition and Food Services (NFS) for education on positive nutritional habits and therapy to encourage disease prevention and management. Comment: [REDACTED]

137. Add this new statement which requires a selection, where specified below:
 Reader verifies that a review of past eye clinic records has been completed (if available) and a review for future eye appointments has been completed to help reduce duplication of care.

0 Yes

0 No

 *Digital retinal imaging has been shown to be an effective method of *
 *screening for conditions such as diabetic retinopathy, but it cannot *
 *substitute for a comprehensive face-to-face eye exam. *

[REDACTED]

Cumulative time of review and management:

5 minutes or more

Less than 5 minutes

 *Digital retinal imaging has been shown to be an effective method of *
 *screening for conditions such as diabetic retinopathy, but it cannot *
 *substitute for a comprehensive face-to-face eye exam. *

Reader verifies that a review of past eye clinic records has been completed (if available) and a review for future eye appointments has been completed to help reduce duplication of care. *

Yes

No

138. Add this appendix of abbreviations be copied over from the TECS template? If so, put at very bottom of template.

Appendix (abbreviations):

AC (Anterior Chamber); AREDS (Age Related Eye Disease Study); ARX (Auto Refraction); BID (Two Times Daily); C:D (Cup-to-Disc); CIC (Care In The Community); CPC (Cyclophotocoagulation); CSME (Clinically Significant Macular Edema); DFE (Dilated Fundus Exam); Dorz/Timol (Dorzolamide/Timolol); DSEK (Descemet's Stripping Endothelial Keratoplasty); FAF (Fundus Autofluorescence); F/U (Follow up); GCC (Ganglion Cell Complex); Gonio (Gonioscopy); H/O (History Of); HTN (Hypertension); HVF (Humphrey Visual Field); IOL (Intraocular Lens); IOP (Intraocular Pressure); K (Keratometry); LASIK (Laser-Assisted In Situ Keratomileusis); MD (Mean Deviation when used with visual field); dB (decibels); MRx (Manifest Refraction); NeoPolyDex/Erythro (Neomycin Polymyxin B Dexamethasone/Erythromycin); NFL (Nerve Fiber Layer); NPDR (Nonproliferative Diabetic Retinopathy); OCT (Optical Coherence Tomography); OD (Right Eye); OS (Left Eye); OU (Both Eyes); PDR (Proliferative Diabetic Retinopathy); PFATs (Preservative Free Artificial Tears); RK (Radial Keratotomy); RNFL (Retinal Nerve Fiber Layer); RTC (Return To Clinic); scVA (Visual Acuity Without Correction/Glasses); SITA (Swedish Interactive Threshold Algorithm); TID (Three Times Daily); UV (Ultraviolet); VA (Visual Acuity); WRx (Prescription glasses currently worn); WRx VA (Visual Acuity With Prescription Glasses); YAG (Yttrium Aluminum Garnet)

Visit Info Finish Cancel

Appendix (abbreviations):

AC (Anterior Chamber); AREDS (Age Related Eye Disease Study); ARX (Auto Refraction); BID (Two Times Daily); C:D (Cup-to-Disc); CIC (Care In The Community); CPC (Cyclophotocoagulation); CSME (Clinically Significant Macular Edema); DFE (Dilated Fundus Exam); Dorz/Timol (Dorzolamide/Timolol); DSEK (Descemet's Stripping Endothelial Keratoplasty); FAF (Fundus Autofluorescence); F/U (Follow up); GCC (Ganglion Cell Complex); Gonio (Gonioscopy); H/O (History Of); HTN (Hypertension); HVF (Humphrey Visual Field); IOL (Intraocular Lens); IOP (Intraocular Pressure); K (Keratometry); LASIK (Laser-Assisted In Situ Keratomileusis); MD (Mean Deviation when used with visual field); dB (decibels); MRx (Manifest Refraction); NeoPolyDex/Erythro (Neomycin Polymyxin B Dexamethasone/Erythromycin); NFL (Nerve Fiber Layer); NFOV (Nonproliferative Diabetic Retinopathy); OCT (Optical Coherence Tomography); OD (Right Eye); OS (Left Eye); OU (Both Eyes); PDR (Proliferative Diabetic Retinopathy); PFRTs (Preservative Free Artificial Tears); RK (Radial Keratotomy); RNFL (Retinal Nerve Fiber Layer); RTC (Return To Clinic); scVA (Visual Acuity Without Correction/Glasses); SITA (Swedish Interactive Threshold Algorithm); TID (Three Times Daily); UV (Ultraviolet); VA (Visual Acuity); WRx (Prescription glasses currently worn); WRx VA (Visual Acuity With Prescription Glasses); YAG (Yttrium Aluminum Garnet)

139. Changed dialog text for repeat imaging appointment>Return 2 years per EPRP **to Return 2 years**
140. Changed dialog text for Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommendation: **to Veteran intends to follow up with outside eye provider (non-VA funded eye care). Recommended timeline for care:**