

UNIVERSITY OF KENTUCKY -
HUMAN DEVELOPMENT INSTITUTE

MEDICAL REPORT

Visual Disability

To Examiner: Please send completed report by
email or fax

Email: HDIDriverRehab@l.uky.edu
Fax: 859 323-0071

Name of patient:

Address:

SECTION I – REPORT OF EXAMINATION

VISUAL ACUITY – Snellen notations (20 feet for distance; 14 inches for reading).

1. Distance: (a) Without glasses:	(b) With best correction:	(c) Percentage loss – with best correction
R	R	R %
L	L	L %
2. Reading: (a) Without glasses:	(b) With best correction:	(c) Percentage loss – with best correction
R	R	R %
L	L	L %
3. Refraction record: (a) Sphere:	(b) Cylinder:	(c) Axis
R	R	R %
L	L	L %
(d) Is difference in spherical correction of the two eyes more than 3 diopters?	Yes	No

VISUAL FIELD: (Do not make detailed test unless indicated by preliminary test) Normal Restricted

If restricted, or if scotomata are present, chart on back of form and describe under pathology.

MUSCLE FUNCTION: (Do not make detailed test unless indicated by preliminary test.) Normal Restricted

If restricted, chart the motor field on back of form and describe under pathology.

BINOCULAR FUNCTION:

- Does patient have useful binocular vision in all directions – with glasses?

For distance	Yes	No	For near	Yes	No
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- If patient does not have useful binocular vision, give reason and explain any handicap arising there from

Is depth perception present? Yes No

SECTION I – REPORT OF EXAMINATION - Continued

COLOR PERCEPTION: Normal Color Blind

If color blind, for what colors?

WASSERMAN REPORT – Results, if secured

SECTION II – DIAGNOSIS

1. Eye Pathology (Primary and Secondary conditions)

2. Primary and contributory causes of condition

3. Characteristics of condition (check):

Stable	Progressive	Improving
Recurrent	Permanent	Communicable

SECTION III – PROGNOSIS AND RECOMMENDATIONS

1. Prognosis as to future developments of condition

2. Treatment recommended – medical or other therapy

3. Are glasses recommended? Yes No If so, please attach prescription.

4. Precautions that should be taken in training or placement of patient in employment:
 - (a) As to types of activity to be avoided

 - (b) As to working conditions to be avoided

Remarks:

Place

Date

(Signature of examiner)

TABLES AND CHARTS

NOTE - The tables below are on the basis of examination at 20 feet for distant and 14 inches for near vision. If the patient's eye condition is such that examination cannot be made at these distances, the distance at which it is made should be shown with the distance at which a person having normal vision would be able to see the same test letters or characters, and the percentage loss should be calculated therefrom.

1. Table of Percentage LOSS of Visual Efficiency Corresponding to Snellen Notations for Distance and for Reading (American Medical Association Standards) and to Jaeger Reading Test Card

FOR DISTANCE At 20 Feet Snellen Notations AMA Chart	FOR READING At 14 Feet Snellen Notations AMA Chart	FOR READING By Test on Jaeger Card	Percentage Loss
20/20	14/14	No. 1	No Loss
20/25	14/17.5		4.3
20/30	14/21	No. 2	3.5
20/35	14/24.5	No. 3	12.5
20/40	14/26	No. 4	16.4
20/45	14/31.5	No. 5	20.0
20/50	14/35	No. 6	23.5
20/60	14/42	No. 8	30.0
20/70	14/49	No. 9	35.0
20/80	14/56	No. 10	41.5
20/90	14/63		46.6
20/100	14/70	No. 11	51.1
20/110			55.0
20/120	14/84	No. 12	60.1
20/140	14/96	No. 14	65.8
20/160	14/112	No. 16	71.4
20/200	14/140	No. 17	80.0
20/240	14/168	No. 18	87.0
20/320	14/224	No. 19	92.8
20/480	14/336	No. 20	98.0

2. Table of LOSS in Binocular Vision (Motor-Field Efficiency)

EXTENT OF LOSS	MOTOR-FIELD EFFICIENCY (percent)
No loss	100
1/20	98
2/25	95
3/30	92
4/35	89
5/40	87
6/45	84
7/50	81
8/60	77
9/70	74
10/80	71
11/20	67
12/20	63
13/20	59
14/20	55
15/20	50
16/20	45
17/20	39
18/20	32
19/20	22
20/20	0