

Space for  
your logo

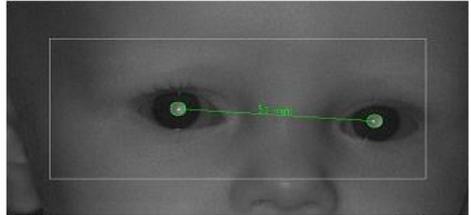
Lucy



and other  
information

### Vision Screening Result

Surname: **Smith**  
 First name: **Emily**  
 Date of birth: **2014-12-12**  
 Date of measurement: **2015-03-30**



57 mm

	Right eye	Left eye
<b>Spherical equivalent</b> (dpt)	+2.75	+3.00
<b>Refraction</b> (dpt)	+4.25 -3.00 6°	+4.75 -3.25 179°
<b>Corneal reflexes</b> (°)	Symmetric (0) 3.4	(20) Asymmetric
<b>Pupil size</b> (mm)	3.8	3.8

Referral criteria		Refer
Anisometropia	Spherical equivalent $\geq 0,75$ dpt	No
Astigmatism	Cylinder $\geq 0,75$ dpt	Yes
Hyperopia	Spherical equivalent $\geq 1,00$ dpt	Yes
Myopia	Spherical equivalent $\geq 1,00$ dpt	No
Corneal reflexes	Asymmetry $\geq 5,0$ ° <small>Asymmetric corneal reflexes are caused either by strabismus (true positive referral) or by fixation to an object other than the camera (false positive referral).</small>	No
Anisocoria	Pupil size $\geq 1,0$ mm	No

Vision screening does not replace a complete eye examination by an ophthalmologist or optometrist. Vision screening must be conducted regularly as eyes may change over time.  
 Screening performed at:

Refer

www.plusoptix.eu - 5.0.19.0

## Vision screening result of plusoptiX S09 „Lucy“

If "Yes" appears for "Refer" in a) to f), a vision disorder is present:

- a) Anisometropia (different spherical equivalents): The eyes project two images of varying sharpness on the retina. The eye with the worse image is not engaged by the brain and may become weak-sighted (amblyopia).
  - b) Astigmatism: In this case a point is projected on the retina as a line, which means that everything appears blurred and distorted to the child.
  - c) Hyperopia (far-sighted): Close objects are seen blurred by the child.
  - d) Myopia (short-sighted): Far objects are seen blurred by the child.
  - e) Corneal reflexes: If the corneal reflexes of both eyes are asymmetric, the child may have a squint (strabismus). Depending on the degree of the asymmetry, this may result in double vision.
  - f) Anisocoria: The pupil diameters of both eyes differ more than one millimeter. If it is not passed on in the family, an examination by a neurologist may be required.
- **If the vision screening result is "Refer", the child must be referred to an eye specialist.**
  - **If the result is "Refer or try again", follow the instructions on the screen and measure again. If the result is again "Refer or try again", please send the child precautionally to an eye specialist.**

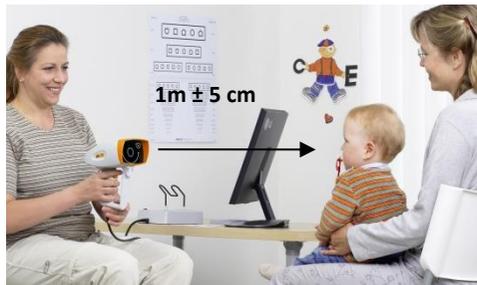
Please note:

Do you detect irregular brightness structures or black dots in one or both pupils, it can indicate media opacities (e.g. a cataract), a foreign particle or corneal damage. In this case the child has to be referred preventative to an ophthalmologist. For examples see user manual, chapter 11.1, page 39.

(\*) Measurement values for the eye specialist

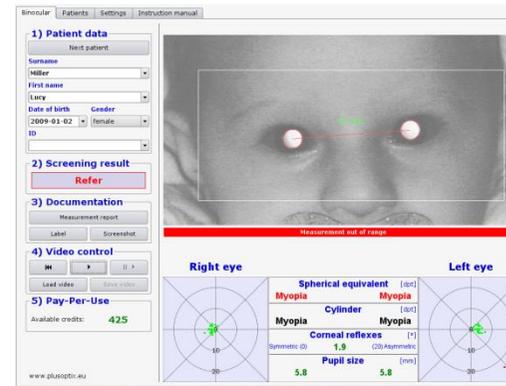
## Practical tips

1. The examination room should only be slightly illuminated, i.e. no direct daylight. Halogen spotlights and light bulbs are emitting infrared light and should be switched off during measurements. Fluorescent lamps and energy-saving lamps can be used for lighting the room.
2. Perform the vision screening before any other examinations, to ensure the cooperation of the child during measurement.
3. Where possible, only the child, one parent and the examiner should be in the room during the examination, to avoid any distraction of the child.
4. The chair on which the parent and the child are seated should ideally be positioned directly at a wall, to ensure that the position of the child cannot be significantly changed by the parent during measurement.
5. Start the measurement by pressing the orange button. The measurement is performed from a distance of one meter (+/- 5 cm) away from the child. Start the measurement from approximately 1,2 m distance to the child. Move forward until the pupils are clear and outlined with green circles. At this moment the warble-sound appears again to signalize that the measurement starts now.



6. It is important to hold the camera on eye-level when performing a measurement. Please make sure that the pupils are not covered by eyelashes, the eyelid or hair. If no measurement result appears, a status message will be displayed. In this case please follow the instructions, outlined on the rear side of this page.

## Statusmessages



Status messages

### Pupils not found

The plusoptiX S09 was unable to find pupils within 20 seconds. Restart the measurement procedure and ensure the correct distance to patient.

### Pupil too large

One or both pupils are larger than 8 mm. Increase the lighting in the room to contract the pupils.

### Pupil too small

One or both pupils are smaller than 4 mm. Decrease the lighting in the room to dilate the pupils.

### Infrared noise

Infrared component in ambient light is too strong. Avoid direct sunlight and switch off “warm” light sources such as halogen or incandescent lamps.

### Measurement out of range

If the spherical equivalent is  $\geq +5.00$  dpt the measurement value shows “Hyperopia”. The child is very far-sighted. If the spherical equivalent is  $\geq -7.00$  dpt the measurement value shows “Myopia”. The child is very short-sighted. In both cases please refer the child to an eye specialist.