

## Record card templates

You may wish to use some or all of the following templates during your training if you are working away from your usual practice under supervision and completing a patient record for:

- an eye examination or other ocular examination
- contact lens fitting
- contact lens aftercare
- dispensing.



## Eye examination record

Trainee Name: \_\_\_\_\_

Patient identifier: \_\_\_\_\_

Date of last examination: \_\_\_\_\_ Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

*Symptoms and history*

*Ocular examination*

*Retinoscopy*

*Subjective and associated findings*

*Additional tests*

*Action and advice to patient*

*Final prescription given*

Supervisor Name:

Supervisor Signature

Date:

## Contact lens fitting record

Trainee Name: \_\_\_\_\_

Patient identifier: \_\_\_\_\_

Date of last examination: \_\_\_\_\_ Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

<i>Spectacle prescription</i>					<i>Keratometry</i>			
	<i>Sphere</i>	<i>Cyl</i>	<i>Axis</i>	<i>VA</i>		<i>Radius</i>	<i>Axis</i>	
<b>RE</b>					<b>RE</b>			
<b>LE</b>					<b>LE</b>			
<i>Motivation for wear</i>								
<i>Pre-fitting measurements</i>								
<i>Fitting</i>								
<i>Lens Specification</i>								
<i>Additional Advice</i>								
Supervisor Name:			Supervisor Signature			Date:		



## Contact lens aftercare record

Trainee Name: \_\_\_\_\_

Patient identifier: \_\_\_\_\_

Date of last examination: \_\_\_\_\_ Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

*Symptoms and history*

*Evaluation of lens fit*

*Slit lamp examination*

*Action and advice to patient*

Supervisor Name:

Supervisor Signature

Date:



## Dispensing record

Trainee Name: \_\_\_\_\_

Patient identifier: \_\_\_\_\_

Date of last examination: \_\_\_\_\_ Occupation: \_\_\_\_\_ Age: \_\_\_\_\_

*Lifestyle requirements*

**Spectacle Prescription**

	Sphere	Cyl	Axis	VA		Sphere	Cyl	Axis	VA
<b>RE</b>					<b>LE</b>				

*Purpose of Appliance e.g. vocational /distance vision /near vision*

*Dispensed Lens/Frame/Appliance with relevant measurements*

Supervisor Name:

Supervisor Signature

Date:

