

JENVIS Dry Eye Report

02/11/2017 | 10:25 AM

Patient name:
DK, R

Date of birth:
06/02/1900

Patient ID:
8102060000000

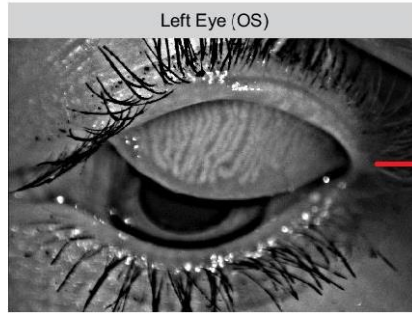
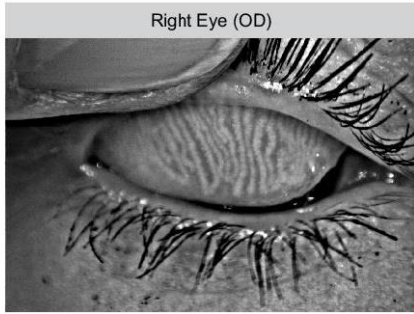
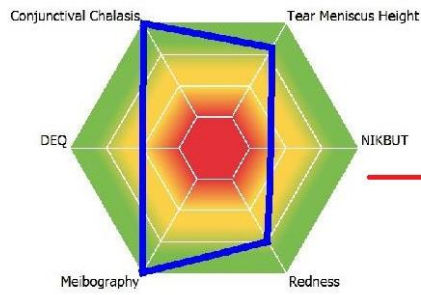
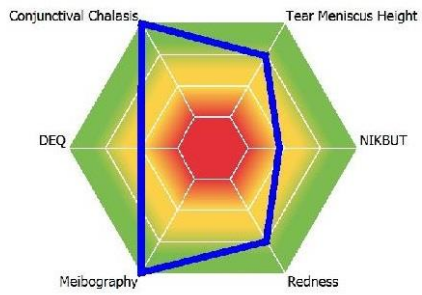
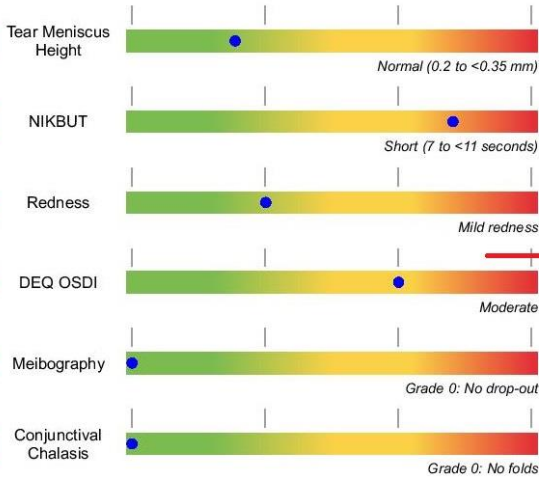
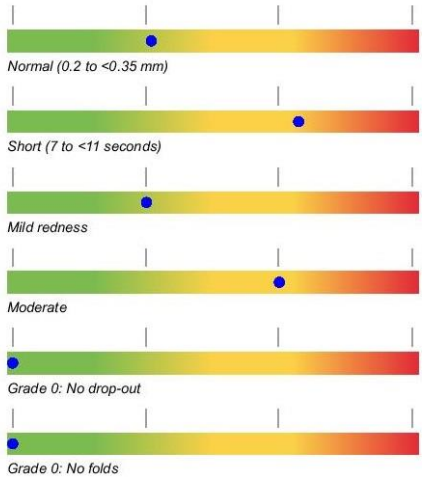


Image of patient's eye



Radar image of measurements taken

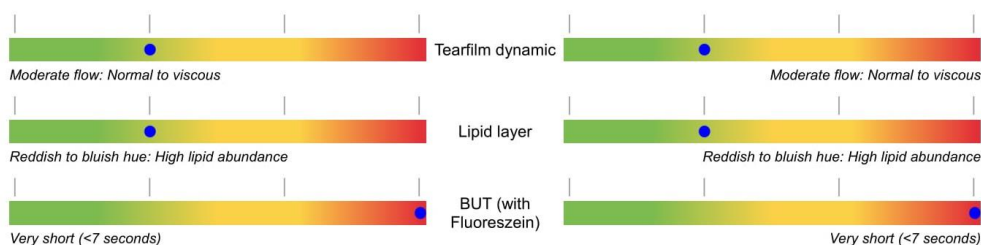


Individual measurements and results of patient



JENVIS Dry Eye Report supported by OCULUS Keratograph.





Recommendation:



Recommendation to the patient

Definitions of terms used:

- Tear Meniscus Height** The tear quantity in a patient's eye may be estimated by measuring the height of the tear meniscus, which is the tear „prism“ that's visible between the ocular surface and the adjacent lid margin. The Tear Meniscus Height has been determined non-invasively using infrared light. As a guideline, values of less than 0.2mm indicate a low tear quantity.
- NIK BUT** The tear film is, among other things, responsible for reducing the friction during blinks and for maintaining the optical quality of the eye. It is therefore crucial that the tear film remains stable between blinks. A tear film that is stable for less than 10 seconds may contribute to symptoms of dry eye or a burning sensation. Insufficient tear film stability can also be reason for fluctuating vision due to thereduced optical quality.
- Redness** Ocular redness can be caused by a number of factors, including ocular dryness, mechanical friction, allergies, contact lens solutions containing preservatives, topical medications or environmental factors. Redness levels of approximately grade 1 (on a 0 to 4 scale) are typically considered normal.
- DEQ OSDI** The patient's perception of their ocular dryness is typically assessed by means of symptom or dry eye questionnaires. By answering specific questions related to ocular dryness symptoms, the severity of dry eye can be estimated. The classification of dry eye severity depends on the questionnaire being used.

Abbreviations and technical terms explained