



CHECK TODAY. SEE TOMORROW

MBS Item 12325

Non-mydriatic Retinal Photography for Detection of Diabetic Retinopathy

Key steps for GPs and others providing diabetic
retinopathy screening for people with diabetes

STEP 1: History

- Ask about problems or difficulties with vision or eyes:
 - Consider blurred vision (at near or distance)? floaters? visual distortion?
- Ask about problems with glasses or contact lenses
- Ask "Can you see clearly and comfortably?"
 - When looking at things up close (e.g. when held in your hands)?
 - When looking at things far away?
- Ask/check whether the person has diabetes

STEP 2: Vision Test/Visual Acuity

(See reverse side)

- Test near vision:
 - Test both eyes together, with glasses if normally worn, using near test
- Test distance vision:
 - Test one eye at a time, with glasses if normally worn, using distance chart

STEP 3: Capture retinal photos and grade for signs of diabetic retinopathy

(See Diabetic Retinopathy Screening Card)

- **Normal or Minimal Non Proliferative**
No referral required. Arrange routine retinal review
- **Abnormal or Moderate Non Proliferative/Diabetic Macular Oedema***
Non-urgent referral (to be seen within 90 days)
- **Sight-threatening or Severe Non Proliferative/Proliferative/Diabetic Macular Oedema***
Urgent referral (to be seen within 30 days)

STEP 4: Refer

- Refer to an optometrist or ophthalmologist if:
 - Vision is worse than 6/12 at distance
 - Visual acuity difference greater than 2 lines between the eyes
 - Patients with a previous medical diagnosis of diabetic retinopathy not under the care of an optometrist or ophthalmologist
 - Patient shows signs of diabetic retinopathy
 - Poor image quality

*Mild Macular Oedema distant from the macula but within posterior pole

#Moderate/Severe Macular Oedema at or near the macula

MBS Item 715

Aboriginal and Torres Strait Islander Health Assessment

Key steps for GPs and others providing eye and
vision screening in health assessments

STEP 1: History

- Ask about problems or difficulties with vision or eyes:
 - Consider 'sore or watery eye' as a possible symptom of trichiasis
- Ask about problems with glasses or contact lenses
- Ask "Can you see clearly and comfortably?"
 - When looking at things up close (e.g. when held in your hands)?
 - When looking at things far away?
- Ask/check whether the person has diabetes

STEP 2: Vision Test/Visual Acuity

(See reverse side)

- Test near vision:
 - Test both eyes together, with glasses if normally worn, using near test
- Test distance vision:
 - Test one eye at a time, with glasses if normally worn, using distance chart

STEP 3: Eye Examination

- Check eye movements
- Check pupils
- Check the front of the eye:
 - Lids, lashes, conjunctiva, cornea
 - Consider trichiasis (from trachoma). Remember the 3 T's – Think, Thumb, Torch
- For people with diabetes check the retina each year:
 - Non-mydriatic retinal photography (Medicare Item 12325) or dilated ophthalmoscopy or refer

STEP 4: Refer

- Refer to an optometrist or ophthalmologist if:
 - Vision or eye problems including a change in vision
 - Reduced vision at near (worse than N8) or distance (worse than 6/12)
 - Retinal photography shows signs of diabetic retinopathy
 - Retinal examination is needed for person with diabetes

The Online Self-Directed Diabetic Retinopathy Grading Course
and Diabetic Retinopathy Screening Card are available on our
website: www.iehu.unimelb.edu.au



Check Near Vision

Reading glasses on (if usually worn)

Test conducted at patients preferred near reading distance
with both eyes open

STEP 1:

Ask patient to hold the chart at their preferred reading distance
Start with middle row (N20)

STEP 2:

Ask the patient to indicate direction legs of E are pointing (up, down, left or right)

STEP 3:

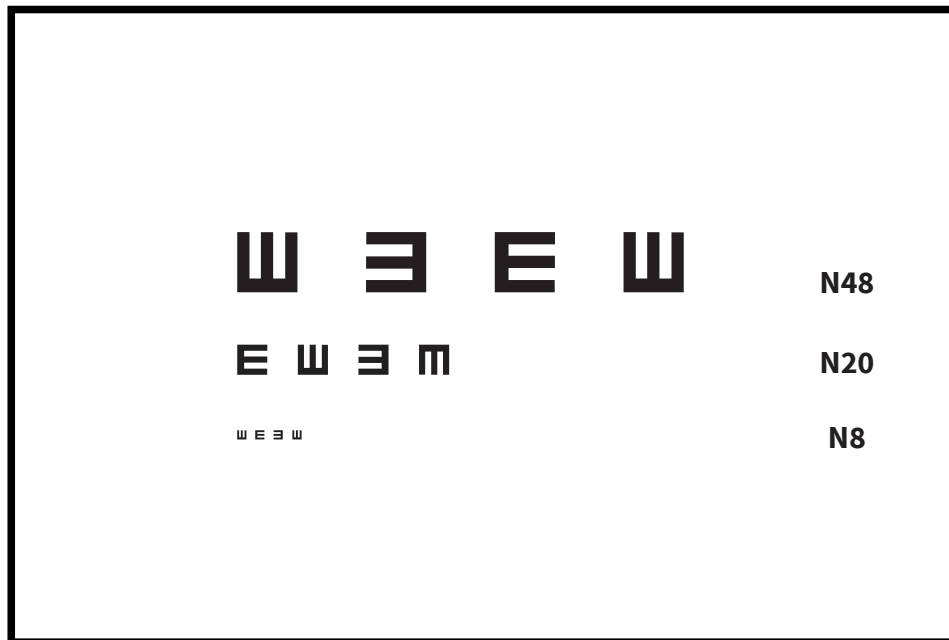
If patient correctly identifies three out of the four E's, test with smallest row (N8)
If not, test with largest row (N48)

STEP 4:

Record N point score of smallest sized E's correctly identified

STEP 5:

Refer for assessment if patient cannot read N8



Check Distance Vision

Distance glasses on (if usually worn)

Test one eye at a time from a distance of 3 metres
in adequate lighting

STEP 1:

Cover non-testing eye with occluder or get patient to cover eye with hand
(ensure patient cannot see between fingers)

STEP 2:

Ask the patient to indicate direction legs of E are pointing (up, down, left or right)

STEP 3:

If the patient correctly identifies three out of four E's record distance vision as
6/12 or better. If not, record distance vision as worse than 6/12

STEP 4:

Repeat above process for other eye

STEP 5:

Refer for assessment if patient cannot read 6/12

