

American Board of Ophthalmology Office Record Review Module

Diagnosis/Case: Rhegmatogenous Retinal Detachment Suspect

Module Definition: A patient who experiences acute onset of “flashes” or “floaters” (less than 1 week duration), seen by you at least once in the past 18 months.

History (Positive or Negative Findings)			
Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Reason for visit/ chief complaint
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Duration of symptoms
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Decreased visual acuity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. Presence of flashes or floaters
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5. Past ocular history
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6. Current ocular medications
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	7. Systemic disorders
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8. Current systemic medications
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	9. Drug reactions/allergies
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10. Family history of ocular and systemic diseases
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11. Recent ocular or head trauma
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12. Appointment scheduled within 48 hours of initial contact with office

Examination and Diagnostic Procedures			
Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Visual acuity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Neutralize glasses or refraction
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Intraocular pressures (IOP)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. Confrontation or formal visual fields
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5. Slit-lamp examination of anterior segment
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6. Pupillary examination
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Posterior segment (fundus) examination:
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	7. With dilated pupils
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8. Indirect ophthalmoscopy of both eyes
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	9. Indirect ophthalmoscopy with scleral depression
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10. Slit-lamp fundus examination with Hruby lens, 78D or 90D lens, or Goldmann 3-mirror lens
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Presence or absence of:
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11. Posterior vitreous detachment

<input type="radio"/>	<input type="radio"/>		12. Vitreous cells/hemorrhage
<input type="radio"/>	<input type="radio"/>		13. Localized retinal hemorrhage in periphery
<input type="radio"/>	<input type="radio"/>		14. Lattice degeneration
<input type="radio"/>	<input type="radio"/>		15. Retinal tear
<input type="radio"/>	<input type="radio"/>		16. Retinal detachment

Assessment and Management			
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Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. If no PVD or acute vitreoretinal pathology, patient advised to return to the office or call if significant increase in floaters, development of a dark, opaque "curtain" or shadow in periphery, or sudden decrease in visual acuity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Laser photocoagulation, cryopexy, pneumatic retinopexy, or other retinal detachment treatment performed or referral to a specialist for treatment
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Patient referred to a retinal specialist
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. Informational materials given to patient

Follow-Up			
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Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Follow-up appointment scheduled within 1-6 weeks

Safety and Environment			
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Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Recommend use of protective eyewear