Physician's Report on Impairment of Vision

U.S. Department of Labor
Office of Workers' Compensation Programs

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OMB No. 1240-0003

INSTRUCTIONS: Record vision of both eyes, uncorrected and corrected, for both distance and near vision. Record vision before injury or occupational disease, if known. Distance vision should be tested using the Snellen chart and near vision by the Snellen or Jaeger charts (i.e., 20/20 and 14/14 or J1, etc.). If, in your opinion, the decreased vision was not caused by the injury or occupational disease, so note under remarks. Reference: "Guides to the Evaluation of Permanent Impairment, chapter VII - The Visual System", American Medical Association. This report is required by 33 U.S.C. 907(b). It is used to request medical information which will be used to determine an injured worker's entitlement to compensation and medical benefits. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number.

1. OWCP No.

2. Carrier's No.

3. Name of injured employee
First Name | M.I. | Last Name

4. Date of injury (mm/dd/yyyy)

5. Employee's home address
line 1: | city:
line 2: | state: | zip:

6. Date of birth (mm/dd/yyyy)

7. Sex
M
F

8. Name of employer

9. Employer's address
line 1: | city:
line 2: | st: | zip:

10. Employee's account of how injury or exposure to occupational disease occurred

11. Which eye was injured?
R L Both

12. Can further improvement be expected?
Yes No

13. Date of maximum healing (mm/dd/yyyy)

14. Was the other eye affected?
NO Yes - Describe in item 17

15. Diagnosis of condition found, was it caused directly or indirectly by the injury described in item 10?

16. Central Visual Acuity. The use of Snellen Charts is desired. The best vision obtainable with Ophthalmic lenses should be used in determining the degree of Central Visual Acuity. Tabulate vision before injury, if known, and give date.

Snellen Reading

	After Injury				Before Injury (if known)				
	Without Correction		With Correction			Without Correction		With Correction	
	Distance	Near	Distance	Near		Distance	Near	Distance	Near
O.D.					O.D.				
O.S.					O.S.				

17. Remarks

Note: information should be provided regarding visual fields, binocular vision, and other functions when indicated. See page 2 of this form.

18. Physician's Signature

19. Address (Number, street, city, state, ZIP code)
city:
st: | zip:

20. Date (mm/dd/yyyy)
04/22/2010

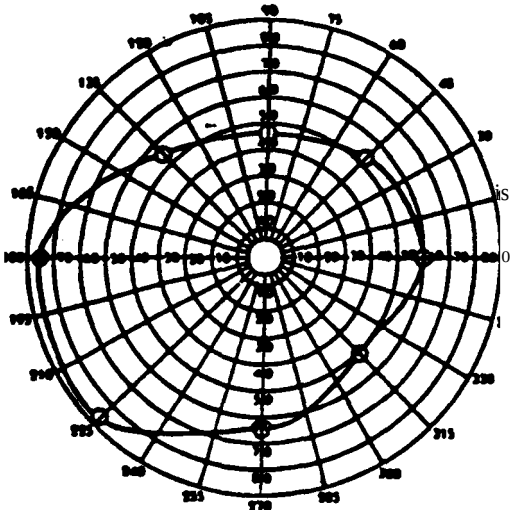
Print Name

Public Burden Statement

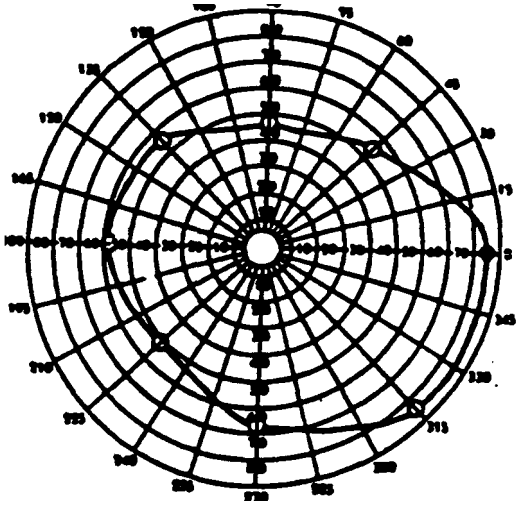
We estimate that it will take an average of 45 minutes to complete this collection of information, Including time for reviewing instructions. searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the U.S. Department of Labor, Division of Longshore and Harbor Workers' Compensation, 200 Constitution Avenue, N.W.,Washington, D.C. 20210. **DO NOT SEND THE COMPLETED FORM TO THIS OFFICE**

VISUAL FIELDS (when indicated)

The visual fields should be determined on a standard perimeter with at least 7-foot-candle illumination and using a white disc target measuring 3 mm. A white 6 mm. disc is recommended for uncorrected



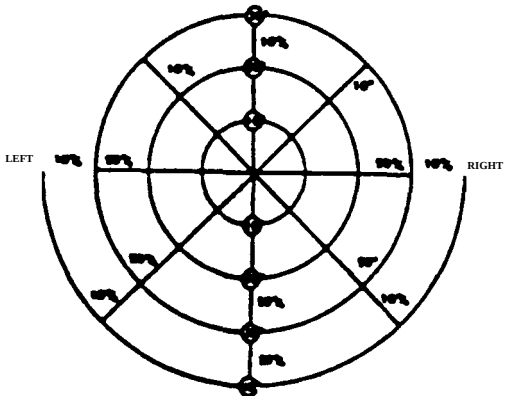
Principal Meridian Readings		
	0	
	45	
	90	
	135	
	180	
	225	
	270	
	315	
O.D.		O.S.



The minimum normal extent of visual fields may be defined as: temporally-85 degrees; down and temporally-85 degrees; down-65 degrees; down and nasally-50 degrees; nasally-60 degrees; up and nasally-55 degrees; up-45 degrees; and up and temporally-55 degrees. The visual field efficiency percentage, of one eye is computed by adding the number of degrees of the eight principal radii (which normally is 500) and dividing by five.

BINOCULAR VISION (when indicated)

The extent of diplopia is determined on the perimeter at 330 mm or on the ordinary tangent screen at a distance of 1 meter in each of the principal meridians using a small test light without colored lenses or corrective prisms. The results of separation of the two images are plotted on the visual field chart.



OTHER FUNCTIONS

Certain ocular disabilities not covered in foregoing sections, such as disturbances of accommodation, metamorphopsia, strabismus, ectropion, lagophthalmos, deformities of the orbit and cosmetic defects. A full report should be made if these or other disabilities are present.

TIME LAPSE BEFORE FINAL EXAMINATION

It is recommended that the final examination be deferred following certain conditions, for example, at least 3 months after all visible evidences of inflammation have disappeared, at least 6 months following surgery, and at least 12 months, preferably not more than 16, in cases of disturbance of the extraocular muscles, sympathetic ophthalmia, traumatic cataract or optic nerve atrophy.