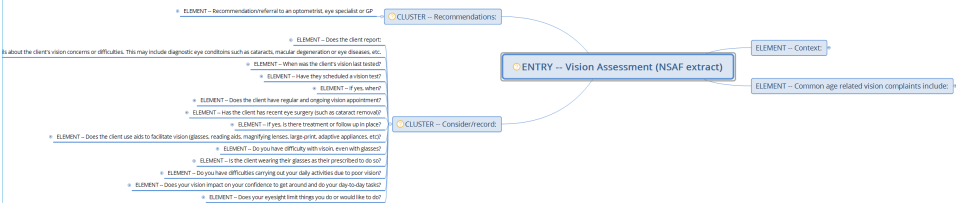


# Vision Assessment (NSAF extract)

If you're interested in this clinical form for use in Explorer Online please [get in touch](#).

Clinical Form Name	Vision Assessment (NSAF extract)
Clinical Area(s)	Aged care
Description of Use	This refers to whether the client has any sensory concerns or difficulties with their vision, hearing or speech.
Availability	Yes, full access in Explorer Online
Explorer Online Screenshot	<div><div>VISION ASSESSMENT (NSAF EXTRACT)</div><div><div>CONTEXT:</div><div>The internal and external structures of the eyes begin to wear as people get older. In general these issues can be corrected with eyeglasses, contact lenses, or surgery. Other changes in vision, however, can be a sign of eye disease such as cataracts, age related macular degeneration, glaucoma and diabetic retinopathy.</div></div><div><div>COMMON AGE RELATED VISION COMPLAINTS INCLUDE:</div><div>I can't see as clearly as I used to, I have difficulty seeing objects close up, It's getting more difficult to see in the dark, I'm less able to adapt to glare, I need more light to see, My eyes are dry and irritated</div></div><div><div>CONSIDER/RECORD:</div><div><div>DOES THE CLIENT REPORT:</div><div><div><div><input type="radio"/> Low vision</div><div><input type="radio"/> Blindness</div><div><input type="radio"/> N/A</div></div><div>PLEASE PROVIDE DETAILS ABOUT THE CLIENT'S VISION CONCERNS OR DIFFICULTIES. THIS MAY INCLUDE DIAGNOSTIC EYE CONDITIONS SUCH AS CATARACTS, MACULAR DEGENERATION OR EYE DISEASES, ETC.</div><div>WHEN WAS THE CLIENT'S VISION LAST TESTED?</div><div><div><div></div><div></div></div><div>HAVE THEY SCHEDULED A VISION TEST?</div><div><div><input type="radio"/> Yes</div><div><input type="radio"/> No</div></div><div>IF YES, WHEN?</div><div><div><div></div><div></div></div><div>DOES THE CLIENT HAVE REGULAR AND ONGOING VISION APPOINTMENT?</div><div><div><input type="radio"/> Yes</div><div><input type="radio"/> No</div></div><div>HAS THE CLIENT HAD RECENT EYE SURGERY (SUCH AS CATARACT REMOVAL)?</div><div><div><input type="radio"/> Yes</div><div><input type="radio"/> No</div></div><div>IF YES, IS THERE TREATMENT OR FOLLOW UP IN PLACE?</div><div><div><input type="radio"/> Yes</div><div><input type="radio"/> No</div></div><div>DOES THE CLIENT USE AIDS TO FACILITATE VISION (GLASSES, READING AIDS, MAGNIFYING LENSES, LARGE-PRINT,</div></div></div></div></div></div></div>
Report Preview	<div><div><div><div>Mrs Patient Marie TEST</div><div>Born 12-Dec-1990 (32y) Gender Female 32y at the time of observation</div></div><div><div>Address 12 Demo Street MAROOCHYDORE QLD 4558</div><div>Phone (07)54566000</div><div>Medicare No 4608688371/1</div></div><div><div>Specimen</div><div><div>Lab No BF6B5283-9989-4707-BE49-2B2BDA1A4AAE</div><div>Request Date 3/03/2023 2:17 PM</div><div>Effective Date 3/03/2023 2:17 PM</div><div>Generated Date 3/03/2023 2:16 PM</div></div></div></div><div><div>Vision Assessment (E DAY)</div><div><div>Context:</div><div>The internal and external structures of the eyes begin to wear as people get older. In general these issues can be corrected with eyeglasses, contact lenses, or surgery. Other changes in vision, however, can be a sign of eye disease such as cataracts, age related macular degeneration, glaucoma and diabetic retinopathy.</div></div><div><div>Common age related vision complaints include:</div><div>I can't see as clearly as I used to, I have difficulty seeing objects close up, It's getting more difficult to see in the dark, I'm less able to adapt to glare, I need more light to see, My eyes are dry and irritated</div></div><div><div>CONSIDER/RECORD:</div><div><div>Does the client report:</div><div>Low vision</div><div>Please provide details about the client's vision concerns or difficulties. This may include diagnostic eye conditions such as cataracts, macular degeneration or eye diseases, etc.</div><div>Myopia</div><div>When was the client's vision last tested?</div><div>23/02/2023</div><div>Have they scheduled a vision test?</div><div>No</div><div>Does the client have regular and ongoing vision appointment?</div><div>No</div></div></div></div></div>

Mind Map



Excel File /Structure

CEN\_Vision\_Assessment\_(NSAF\_extract).v1.xlsx

Editor Screenshot

CEN\_Vision\_Assessment\_(NSAF\_extract).v1

Description

Uses 0 Archetype(s)

Definition

ENTRY -- Vision Assessment (NSAF extract)

ELEMENT -- Context:

ELEMENT -- Common age related vision complaints include:

CLUSTER -- Consider/record:

ELEMENT -- Does the client report:

ELEMENT -- Please provide details about the client's vision concerns or difficulties. This may include diagnostic eye conditions such as cataracts, macular degeneration or eye diseases, etc.

ELEMENT -- When was the client's vision last tested?

ELEMENT -- Have they scheduled a vision test?

ELEMENT -- If yes, when?

ELEMENT -- Does the client have regular and ongoing vision appointment?

ELEMENT -- Has the client had recent eye surgery (such as cataract removal)?

ELEMENT -- If yes, is there treatment or follow up in place?

ELEMENT -- Does the client use aids to facilitate vision (glasses, reading aids, magnifying lenses, large-print, adaptive appliances, etc)?

ELEMENT -- Do you have difficulty with vision, even with glasses?

ELEMENT -- Is the client wearing their glasses as their prescribed to do so?

ELEMENT -- Do you have difficulties carrying out your daily activities due to poor vision?

ELEMENT -- Does your vision impact on your confidence to get around and do your day-to-day tasks?

ELEMENT -- Does your eyesight limit things you do or would like to do?

CLUSTER -- Recommendations:

ELEMENT -- Recommendation/referral to an optometrist, eye specialist or GP

Ontology

Presentation