

CALIFORNIA LIONS FRIEND IN SIGHT, PATHOLOGY PROFILE FOR FYE JUNE 2013

Screening Number	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10	#11	#12	#13	#14	#15	January 2012 thru June 2012
Screening Location	San Jacinto	Big Bear	Tecate, Mexico	Riverside	Phelan	Tecate, Mexico	Thermal	Rancho Cucamo	San Jacinto Emmerso	Oxnard	Santa Ana	29 Palms	Apple Valley	Eastvale	North Palm Springs	
	number of patients with respective pathology															
Pathology, type of																
Cataracts			8	1	4	4	2	5		2		1	3	3	1	
Glaucoma & or suspect	2	3		4	6	7	3	4	10	14	8	5	2	11	7	
Pterygium	2		1		1	1	2		1	1			1		1	
Laser Peripheral Irdotomies(narrow angles)		2	2						2			1	1	1		
Strabismus		2	1				1					1				
Dry Macular Degeneration, life style advice	1	1			2		1							1		
6 month follow up on background diabetic retinopathy		1	1		1	2	1	2			1	1	1		1	
Na Yag capsulotomy for a secondary cataract						1										
Laser treatment for proliferative diabetic retinopathy							1	2			1		1	1		
Retinal Detachment																
Amaurosis fugax																
Laser treatment for diabetic maculopathy					1			1						1		
Laser treatment for proliferative retinopathy (sickle cell)																
Dilated Fundus Examination for flashes & floaters				1										3		
Treatment for Neovascular Glaucoma/ Diabetes																
Excision of a sebaceous cyst																
Work up for recent onset of diplopia/strabismus																
Treatment for a corneal abrasion																
Optic Neuritis																
Bacterial Conjunctivitis																
Allergic Conjunctivitis																
Seborrheic Blepharitis																
Work up for optic disc pallor				1					1							
3 month follow up on diabetic retinopathy					1			1								
Ptosis sugery																
Dilated Fundus Examination for high myopia																
HGP fit for irregular cornea and keratoconus	1		1								1			1		
Ectropion Surgery																
Macular Hole						1										
Penetrating Keratoplasty secondary to corneal scar			1		1					1						
Right homonymous hemianopic visual field loss																
Pupillary defect																
Intermittent diplopia																
Optic Atrophy		1						1	1	1	1	1				
Unilateral apahia				1												
Anterior Uveitis									1							
Transient bilateral loss of complete visual field																
Lacrimal dilation/probing/irrigation																
Prosthetic shell																
Bilateral optic disc edema			1								1					
Optic disc shunt vessesl					1											
Branch Retinal Venous Occlusion						1										
Central Retinal Venous Occlusion						1										
Wet Macular Degeneration						1				1					2	
Pars Planitis								1								
Blepharospasm										1						
Conjunctival mass lesion										1						

Blepharospasm	may cause various levels of visual impairment secondary to the degree of eyelid closure, various treatment options exist.
Conjunctival mass lesion	concern over a mass lesion that is not normally present and is growing in size, raises the concern over cancer. Excision/Biopsy needed.
Marginal Keratitis	usually a chronic condition that can lead to corneal scarring, irregularity and neovascularization. Untreated can cause loss of vision.
Conjunctival cyst	usually removed secondary to comfort and or cosmetic reasons. Not typically associated with blindness issues.
Retinal Mass Lesion, vascularized	lesion may be benign, however needs to be photo-documented, A & B scanned and followed for change. Increasing size raises concern for malignancy/enucleation.
Convergence Insufficiency	patient experiences double vision when reading, needs visual therapy to enhance his visual systems ability converge at near. Not a pathological concern.