

convergence Insufficiency	patient experiences double vision when reading, needs visual therapy to enhance his visual systems ability converge at near. Not a pathological concern.
Retinal Hole / Retinal Tear	a hole / tear in the retina may need to be prophylactically treated if it appears likely to lead to a retinal detachment
Episcleritis	usually self limiting and uncomfortable, however recurrent flare ups raises the suspicion of an associated systemic auto-immune disease.
Central Serous Chorio-retinopathy	serous fluid leaks into the sub-retinal space causing distortion, usually resolves on its own without significant residual vision loss. However, treatment may be necessary for some cases.
Low Vision Workup	patient has lost vision from trauma and or pathology and may benefit from certain low vision devices to help enhance what residual vision they have.
Corneal ulcer	bacteria, viruses and fungus are among the common causes of a potentially vision threatening condition. Topical and sometimes systemic treatment is warranted.
Choroidal nevus vs. malignant melanoma	a choroidal nevus can transform itself over time (increased diameter and thickness), as this growth reaches a certain size, there is an increased risk for it to become malignant.
Corneal Foreign Body	a foreign object imbedded in the cornea needs to be removed and covered with antibiotics for comfort and the prevention of a corneal ulcer which could lead to serious problems.
Vitreous Hemorrhage	sometimes the hemorrhage is large/dense enough not to allow visualization of the back of the eye. Its presence can be related to diabetes, retinal tears/detachments, etc.
endophthalmitis	a serious intraocular infection that could lead to blindness.
old retinal detachment repair	assessment determines whether the repair was successful and maintained or is starting to fail or predispose the retina to another detachment.
asteroid hyalosis, vitrectomy consideration	if the patient is bothered by the condition in the vitreous, BCVA is down and visualization of the fundus is impossible; surgical treatment may be indicated.
ruptured limbal sutures	cause discomfort/pain and allow a potential pathway for microbes to enter the eye. Could possibly lead to a severe intra-ocular infection and loss of sight.
ectopic pupil secondary to peripheral anterior synchia	the pulled / distorted pupil may not allow light to be focused directly on the foveola at the back of the eye. As a result, vision may be poor and the visual field limited.
Chalazion	a nodular mass in the eyelid, secondary to a hordeolum. Typically not sight threatening, but can cause comfort and cosmetic issues.
Orbital Pain	pain behind the eyeball can be associated with various problems including, tumors and inflammations, infections, A-V malformations and auto-immune diseases which can be very serious.
Thygeson's Keratitis	can disrupt vision until the punctate lesions and associated sub-epithelial haze resolves. Artificial tears, soft contact lenses and or topical steroid drops may be necessary.
Blepharochalasis	the skin of the upper eyelid extends downward obscuring vision. If excessive and the patient is symptomatic, surgical correction is necessary. Does not cause blindness.
Iris melanoma	its presence can be sight and or life threatening. Treatment is critical.
Herpes Simplex Keratitis	can lead to visual impairment and or blindness depending on the level of residual scarring / corneal reaction.
Amblyopia	can occur independent of strabismus, but it is often associated with it. Here we are talking about deprivation amblyopia from the lack of a clear image on the retina early in life.
Bell's Palsy	when the 7th cranial nerve is affected, the patient may not be able to adequately close the eyelids and subsequently lead to dry eye complications.
Basal Cell Carcinoma	a skin cancer commonly found around the lower eyelids. It has a low potential to spread systemically, but locally can lead to the need to surgically remove large sections of the eyelid.
Hollenshort plaque, emboli lodged in retinal arteriole	this embolus usually presents no loss of vision to the eye, but represents a systemic threat to a cerebro-vascular accident waiting to happen. A systemic medical work up is needed.
Calcific Band Keratopathy	deposits of calcium form in the cornea, limiting vision. It can be associated with high serum calcium and phosphate levels for which systemic treatment is needed. Corneal debridement is needed.
Disciform Keratitis	probable hypersensitivity reaction to viral antigen causing a host / viral reaction in the cornea that can lead to corneal scarring and vision loss. Topical and oral medications are indicated.
Proptosis, unilateral or bilateral	can be as a result of various conditions, most commonly Graves disease. Orbital tumors and inflammation are other less common sources. Compression of the optic nerve can lead to vision loss.
Conjunctival Vascular Lesion	a symptomatic growing lesion needs surgical treatment to rule out malignancy and maintain a normal comfortable blinking process.
Contact Lens Fitting for Anisometropia	large differences in refractive errors between the eyes cannot be adequately addressed with eyeglasses. Left uncorrected, amblyopia can develop in the under corrected eye when fit with eyeglasses.
Phthisis	an eye becomes soft or "wasted", from previous injury, surgery and or disease. Treatment is surgically based and outcomes are usually not good.
Hordeolum	infected eyelid glands, probably bacterial. Can produce a swollen and tender eyelid that can spread to become a preseptal cellulitis, which can be a precursor to an orbital cellulitis and problems.
Orientation & Mobility Training:	skills that are taught and learned by a person who is blind for whatever reason.
Macular Dystrophies	various dystrophies that involve the macular area of the retina, can lead to various levels of visual impairment to blindness. These dystrophies are correlated to genetic defects & show up early in life.
Limbal Dermoid	a benign tumor involving normal human tissue, but in the wrong place. This tumor sits in an area where the white of your eye meets the color of your eye. Removal improves comfort & comesis.
Keratitis, secondary to contact lens overwear	usually recoverable with no loss of vision; however neovascularization and corneal scarring can occur causing visual impairment.
Isolated cotton wool spots	can reflect as a sequale of various systemic conditions of which high blood pressure, diabetes and HIV are most common. Systemic workup and ocular obseravation to resolution is recommended.
Retinitis Pigmentosa	a degenerative disease that affects the retina causing loss of night vision first and then eventually complete loss of vision in the day. Currently, there is no treatment to stop the loss.
High Myopia, CL intolerance: Intra-ocular Contact Lens	a lens is implanted behind the iris and in front of the normal crystalline lens of the eye to help the patient see better.
Elevated Sub Retinal Mass Lesion	fluid, an older hemorrhage or a tumor would be your major concern. Depending on the nature of the lesion, vision or life could be a risk.
Epi-retinal Membrane	a membrane forming on top of the retina in the macular area of the eye can dramatically distort your vision and possibly lead to a macular hole developing. Treatment involves stripping the membrane.
Visual Therapy for a General Binocular Dysfunction	headaches, intermittent diplopia adn eye strain can be linked to a visual system that works, but has limited capacity to maintain normal binocular and accomodative function throughout the day.
plaquenil macular toxicity	patients taking this medication for several years are at a slight risk for toxicity development in the retina that can lead to irreversible damage and loss of central vision.
hypertensive retinopathy	if the patients blood pressure is excessively high, the blood vessels in the retinal can start to rupture affecting the eye, like a stroke to the brain-which is also a concern in this situation.
systemic assessment / treatment for high cholesterol	certain eye findings can raise the possibility that the patients cholestrol levels are elevated. Systemic assessment / treatment is warranted to help prevent vascular accidents like strokes / heart attacks.
speciality contact lens fit for congenital aniridia	failure of the pupil to form normally leads to increased blur and light sensitivity. Special contact lenses can create an artificial iris and functional pupil for better vision.
work up for chronic progressive external ophthalmoplegia	the patient loses all ability to move the eyes and ptosis develops obscuring vision and creating abnormal body posture. Surgical treatment of the ptosis needs to be considered.
treatment for an inflamed pterygium / pinguecla	a short course of topical steroids will usually decrease the inflammation and increase comfort. Artificial tears and Rx sunglasses may defer the need for surgical treatment.
dry eye syndrome	we all loose the ability to produce the same volume/quality of tears with time. Artificial tears, topical medications & sunglasses can all help diminish discomfort and help preserve the corneal integrity.
trichiasis	eye lashes rubbing against the cornea from misdirected growth or an inward turning of the eyelid can desiccate the cornea and be very painful and make you more likely to develop corneal ulcers.