

Pre-Consult:

Hi Daniel, my name is Maritza, I am one of Dr. Cockrell's technicians. With the current movement restrictions, we're taking additional temporary measures to reduce exposure time while at our office. In essence, we will be spending more time with you on the phone today to reduce your in-office time. Is it okay if we take a moment to review a few things with you about your appointment?

(Patient: sure)

Great! Once you arrive, a technician and Dr. Cockrell will be onsite with you. We will have you sign any necessary documents for your visit and take you back promptly to being preliminary tests.

The **first** test we will conduct is with our autorefractor/keratometer and Dr. Cockrell thinks it is practically magic. It works by bouncing an infrared beam of light off the back of your eye, it transfers the aberrations in your optical system to a computer which calculates an objective idea of your prescription for Dr. Cockrell to use in your assessment. It uses the reflection of another light source off the front of your eye to measure the shape. It also allows me to assess the continuity of the reflection, providing us with information regarding the quality of your tear film. In many patients a reduction in the quality of the tear film interferes with clear, comfortable vision.

The **second** test we will conduct is with our non-Contact Tonometer: This instrument is called a tonometer and it gives the doctors a measurement of your intra-ocular tension and is very important in assessing the possibility of Glaucoma or an increase of pressures associated with an injury. It measures the response of your eye to a mild puff of air. Although the puff of air is relatively mild, it can be a little surprising so don't worry it will not harm you in any way.

OR

The **second** test we will conduct is with our iCare Tonometer: This instrument uses rebound technology that requires no air or drops to evaluate deceleration, contact time and other motion parameters. It gives the doctors a measurement of your intra-ocular tension and is very important in assessing the possibility of Glaucoma or an increase of pressures associated with an injury. This test replaces what was previously used before, more commonly associated with a puff of air. Most patients prefer the iCare tonometer and report a quick, light tickle along their eyelashes if anything at all.

If a Visual Field is necessary for your exam: this test will be conducted with a visual fields' analyzer. It uses flashing lights of varying brightness to assess the sensitivity and health of your visual pathway. Your visual pathway extends from the eye all the way to the back of the brain. The visual field allows the identification and location of potential problems all along the pathway. Some of the problems that it helps identify range from Glaucoma and vascular defects to tumors of various types

If an OCT is ordered: This instrument is called an optical coherence tomography (OCT) and it is a noninvasive optical diagnostic imaging modality and is very important in assessing the possibility of AMD, progression of glaucoma, macular edema, macular holes from high myopic patients, diabetic retinopathy, and other conditions. It measures the cross sections of retinal microstructures with finer resolutions than an ultrasound and MRI in real time and is used to determine subtle changes in retinal thickness. It performs by measuring the time delay and intensity of back reflected light from structures inside the tissue of your eye.

You will then go into the exam room with the technician and begin testing your visual acuity. Visual Acuity is how well you see from far away while looking at a letter chart. We will be evaluating your acuity in your current prescription and without correction. There is no right or wrong answer, you just have to read the smallest line that you can see comfortably.

The technician will then let the doctor know you are ready.

Dr. Cockrell will then begin your assessment, if a technician is available, they will also be in the exam room. During your visit, Dr. Cockrell will check for any pupillary defects and visual field confrontations. He will also conduct a slit lamp examination and an intra ocular evaluation if needed.

Any prescriptions and orders will be reviewed by Dr. Cockrell.

Once Dr. Cockrell has concluded the exam, the technician will walk you up to our front desk. Our receptionist will collect your applicable copy at that time.

Do you have any questions?

(Patient: no)

Great! That is a summary of your timeline at the office. Next, I would like to review a few things I need for your chart. It looks like you will be seeing us for a medical office visit.

<see red eye triage questions to applicable OV>

Thank you for all of that information. In efforts to protect our patients and staff, do you mind if I ask a few additional questions?

- Have you recently been ill or around anyone ill?
- Have you recently traveled or been around anyone who has contracted the coronavirus?
- Have you recently had a cough, fever, or symptoms of a respiratory infection?

Yes: “We kindly request that we reschedule your appointment during a time that you are feeling well and reduce the risk for exposure for any possible infections. We recommend contacting your physician. Thank you for understanding and we appreciate your consideration.”

No: “Thank you for helping us protect the safety of all our patients, staff, and doctor. Let’s continue. “

Now let’s begin a review of your health history:
<see charting page>

Thank for you taking the time to answer my questions. All of this information is important to Dr. Cockrell’s assessment. This will not only reduce your in-office time, it will eliminate any paperwork at the office, other than maybe a signature.

Do you have any questions at this time?

(Patient: No)

Great! We’ll be happy to see you tomorrow for your 2:00 appointment. Take care, Daniel.