GUIDELINES FOR EXAMINATION BY AN OPHTHALMOLOGIST OR OPTOMETRIST

1. These guidelines relate to requirements for examination by an ophthalmologist or optometrist for applicants other than aircrew, Joint Battlefield Airspace Controller (JBAC) or RAAF Air Defence Officers (AIRDEFO). The ophthalmologist or optometrist is to record examination details required to allocate an Minimum Visual Requirement (MVR) on Form PM529 Eye Examination.

2. Guidelines for referral to Ophthalmologist or Optometrist are in table 1.

<table>
<thead>
<tr>
<th>Examination and Assessment</th>
<th>Requirement for review</th>
<th>Conducted by</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Specialist occupations</strong></td>
<td><strong>Mandatory specialist review is required for these occupations.</strong></td>
<td>Ophthalmologist</td>
</tr>
<tr>
<td>Maritime Warfare Officer</td>
<td>If more then 12 months or less than 24 months have elapsed since initial ophthalmology examination and ADF entry, unless clinical indications for ophthalmology examination exist.</td>
<td>Optometrist</td>
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<tr>
<td>Submarine Officer Aircrew</td>
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<tr>
<td>Air Defence Officers</td>
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<tr>
<td>(AIRDEFO)</td>
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<td>Joint Battlefield</td>
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<td>Airspace Controller (JBAC)</td>
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<td>Explosive Ordnance Personnel</td>
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<tr>
<td><strong>Special Forces (SF)</strong></td>
<td>If an applicant for SF does not meet the standard for near vision (N5 at 30-50 cm and N14 at one metre with or without visual correction).</td>
<td>Optometrist</td>
</tr>
<tr>
<td><strong>Previous history of eye</strong></td>
<td>Review required.</td>
<td>Ophthalmologist</td>
</tr>
<tr>
<td>disease or surgery including refractive surgery, corneal surgery, amblyopia.</td>
<td></td>
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</tr>
<tr>
<td><strong>Applicants with a VA of:</strong></td>
<td>Review required.</td>
<td>Optometrist</td>
</tr>
<tr>
<td>No worse than 6/12 unaided and 6/6 aided but contact lenses worn.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No worse than 6/12 unaided but spectacles or contact lenses are not worn.</td>
<td>Review required. Applicants who are 6/6 6/6 unaided do not require further assessment.</td>
<td>Optometrist</td>
</tr>
<tr>
<td>No worse than 6/24 unaided and 6/9 aided.</td>
<td>Review required</td>
<td>Optometrist</td>
</tr>
<tr>
<td>Worse than 6/24 unaided and 6/9 aided.</td>
<td>Review required</td>
<td>Ophthalmologist</td>
</tr>
<tr>
<td><strong>Applicants over the age of 45 years</strong></td>
<td>Particular emphasis is to be placed on detection of raised intra-ocular pressure and the presence of presbyopia.</td>
<td>Optometrist unless Ophthalmologist assessment is required as above.</td>
</tr>
</tbody>
</table>

Table 1 Applicants requiring eye assessments with an ophthalmologist or optometrist
3. Ophthalmologists and optometrists should ensure that they have a copy of the following information and documentation when assessing an applicant for service in the Australian Defence Force:

   a. Guidelines for examination by an Ophthalmologist or Optometrist (this paper);

   b. Australian Defence Force Minimum Visual Requirements; and

   c. *Eye Examination* – Form PM 529.

These documents are also available on the Royal Australian and New Zealand College of Ophthalmologists’ website at [www.ranzco.edu](http://www.ranzco.edu) and the Australian College of Optometrists’ website [www.optometrists.asn.au](http://www.optometrists.asn.au) or from the Defence Force Recruiting Centre.

4. An applicant will require at least one appointment with the ophthalmologist or optometrist. Two appointments are needed if contact lenses are worn as the preferred method of visual correction most of the time. Contact lenses must not be worn for 48 hours prior to examination:

   a. **First appointment.** At the first appointment, the candidate should present with their glasses and/or contact lenses. The examination is to include:

      (1) **subjective refraction** prior to cycloplegia which includes uncorrected vision and visual acuity with spectacle lenses;

      (2) **cycloplegic refraction** using *cyclopentolate HCl 1%* (waiting the usual 10-20 minutes required for effective cycloplegia). The minus cylinder form must be used for recording dioptres;

      (3) physical examination of the eyes including exclusion of:

         (a) squint;

         (b) heterophoria using a Maddox rod;

         (c) abnormal ocular motility;

         (d) abnormal convergence;

         (e) acute or chronic disease of the eye or eyelids;

         (f) visual fields to confrontation only;

         (g) any evidence of refractive surgery;

         (h) high intraocular pressure (mandatory check for applicants over 45 years); and

         (i) fundal abnormality.

   (4) **Near vision testing.** Applicants for Special forces are required to undergo near vision testing. The recommended near vision test procedure is to use the Sussex Vision Rayner near vision testing card which displays the N series of letters (faculty approved N5 to N48).
(a) **Near test.** The near test is a small card containing a few short lines or paragraphs or text printed in high contrast and viewed at an appropriate reading distance using optimal illumination. To test near vision, the applicant will be asked to hold the card at normal reading distance. The applicant is to be tested in the range of 30-50cm from the face and then at one metre from the face and read aloud the paragraph containing the smallest print they can comfortably read without squinting. The applicant is to be asked if they normally wear glasses or contact lenses for near vision. If visual correction is used near vision is to be tested with correction, otherwise the test is to be conducted unaided.

(b) **Standard.** The standard for near vision for all ages is N5 at 30-50 cm and N14 at one metre with or without visual correction

b. **Second appointment.** When a second appointment is required, the candidate should present in contact lenses after having worn them for at least four hours. The candidate should also be instructed to bring their spectacles to the second appointment. The ophthalmologist or optometrist should assess the following:

(1) visual acuity wearing contact lenses; and

(2) spectacle blur, ie the vision in glasses immediately upon contact lens removal.

5. **Contact Lenses.** A candidate who wears contact lenses may be accepted if:

a. the minimum visual requirement (MVR) is satisfactory,

b. there is no pathological condition of the eyes,

c. the existing contact lenses are suitable for the proposed employment, and

d. the wearing of contact lenses is not obligatory and spectacles can be substituted.

**Refractive Surgery**

6. Whilst refractive surgery provides an excellent alternative to the wearing of spectacles or contact lenses, it is important to understand that it is NOT a means for applicants to overcome uncorrected refractive errors which are outside existing ADF entry standards. Allocation of an MVR is based on the post-operative corrected refractive error and not on the pre-operative uncorrected error. For example an applicant with pre-surgery myopia of -5.00 dioptres and who corrects to 6/6 post-surgery is MVR 1. Applicants with a pre-operative error in excess of +/- 7.00 dioptres but who correct to MVR 1 after refractive surgery remain Class 4.

7. When the DFRC MO or optometrist suspects that an applicant may have had refractive surgery, the applicant is to be referred to an ophthalmologist for assessment including corneal mapping.

8. Applicants who present for enlistment/appointment and who declare a history of refractive surgery, are to provide full details of their pre and post-operative refractions as well as details of after-care from their provider.

9. Any applicant who has had refractive surgery must meet the following requirements:
a. Only Photo Refractive Keratotomy (PRK), Laser Epithelial Keratomileusis (LASEK) or Laser in-situ keratomileusis (LASIK) are acceptable for ADF entry. Applicants who have had Radial Keratotomy (RK), orthokeratology or the implantation of phakic intraocular lens are not acceptable for ADF entry.

b. At least three months must have elapsed post surgery.

c. Two refractions are to be performed post surgery by an ophthalmologist, at least one month apart, with less than 0.5 dioptres of refractive difference, and less than 10 degrees of axis deviation, between the two measurements in the same eye.

d. They must have no history or evidence of unwanted symptoms or post-operative effects (including but not confined to: decrease in best corrected visual acuity, raised intra-ocular pressure, corneal haze, reduced contrast sensitivity, corneal ulcers, pain, blurred vision, glare or flare, halos around lights or objects, night vision, aberrations, no alteration in colour perception, etc) with special note of haze and the absence of corneal aberrations.

e. They must have discontinued the use of all topical eye drops including steroids or anti-inflammatory agents but artificial tears may be used as needed.

f. They must meet all vision standards of the trade or specialisation.

Assessment of applicants referred with a history of night vision problems

10. Good night vision is essential for all members of the ADF, in particular those personnel required to operate in the field using tactical lighting or night vision devices. Poor or degraded night vision could be a major safety concern in ADF operations.

11. From time to time applicants for the ADF may be referred for an assessment of their night vision because of a history of difficulty seeing at night. As there are no readily available screening tests for true night blindness, an assessment by an ophthalmologist is considered essential to exclude known causes of night blindness; eg retinitis pigmentosa; vitamin A deficiency, prescribed medication (eg anti malarials) diabetes, cataract, macular degeneration, severe myopia, etc. If the history and ophthalmological assessment supports the diagnosis of true night blindness or a related condition and where night vision is compromised, the applicant will be considered unsuitable for entry.

Colour perception

12. Colour perception requirements differ for specific military occupations. Medical officers at the Defence Force Recruiting Unit will determine fitness of an applicant for ADF entry in a particular occupation.