



# Eye Related Skills For FLW





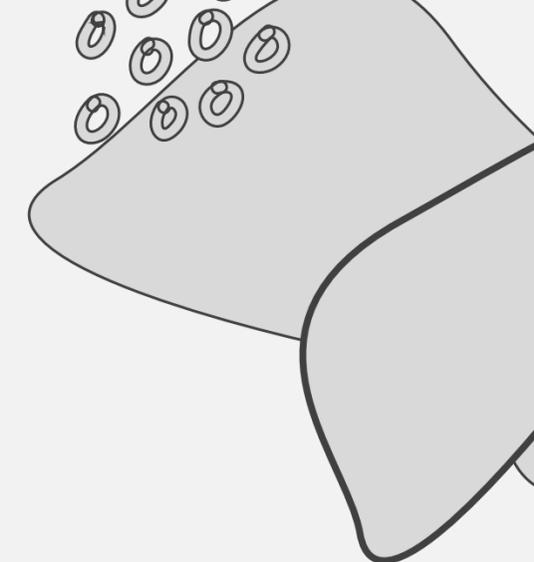
# LEARNING OBJECTIVES

1. What skills ASHA/MPW should know related to eye care- step by step learning for patient and family members understanding.
2. Basic checks before initiation of any procedure.



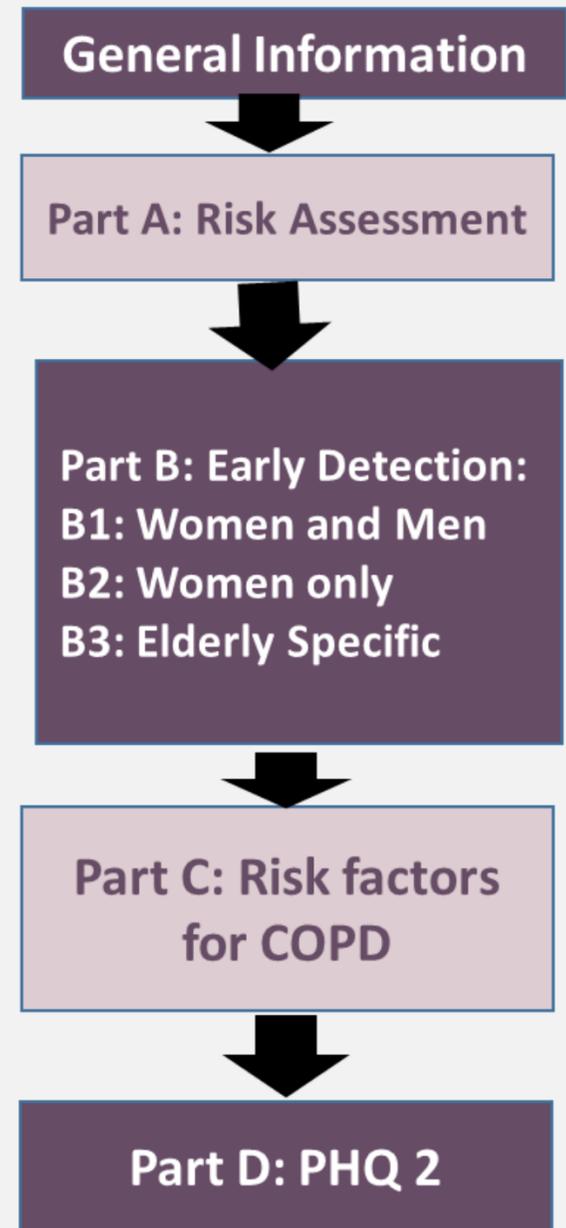


# WHAT WE HAVE IN CBAC FOR EYE CARE



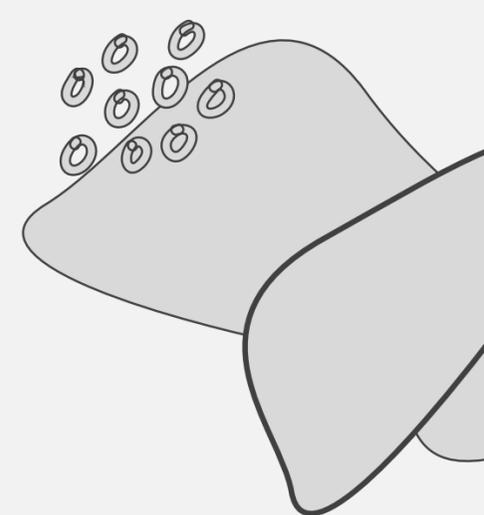
## PARTS OF CBAC

Part B: Early Detection: Ask if Patient has any of these Symptoms		
B1: Women and Men	Y/N	
Shortness of breath ( <i>difficulty in breathing</i> )		History of fits
Coughing more than 2 weeks*		Difficulty in opening mouth
Blood in sputum*		Any ulcers in mouth that has not healed in two weeks
Fever for > 2 weeks*		Any growth in mouth that has not healed in two weeks
Loss of weight*		Any white or red patch in mouth that has not healed in two weeks
Night Sweats*		Pain while chewing
Are you currently taking anti-TB drugs**		Any change in the tone of your voice
Anyone in family currently suffering from TB**		Any hypopigmented patch(es) or discolored lesion(s) with loss of sensation
History of TB *		Any thickened skin
Recurrent ulceration on palm or sole		Any nodules on skin
Recurrent tingling on palm(s) or sole(s)		Recurrent numbness on palm(s) or sole(s)
Cloudy or blurred vision		Clawing of fingers in hands and/or feet
Difficulty in reading		Tingling and numbness in hands and/or feet
Pain in eyes lasting for more than a week		Inability to close eyelid
Redness in eyes lasting for more than a week		Difficulty in holding objects with hands/fingers
Difficulty in hearing		Weakness in feet that causes difficulty in walking





# ASHA- Checking the Eyesight to identify People with Poor Vision (blindness and low vision) in the Community

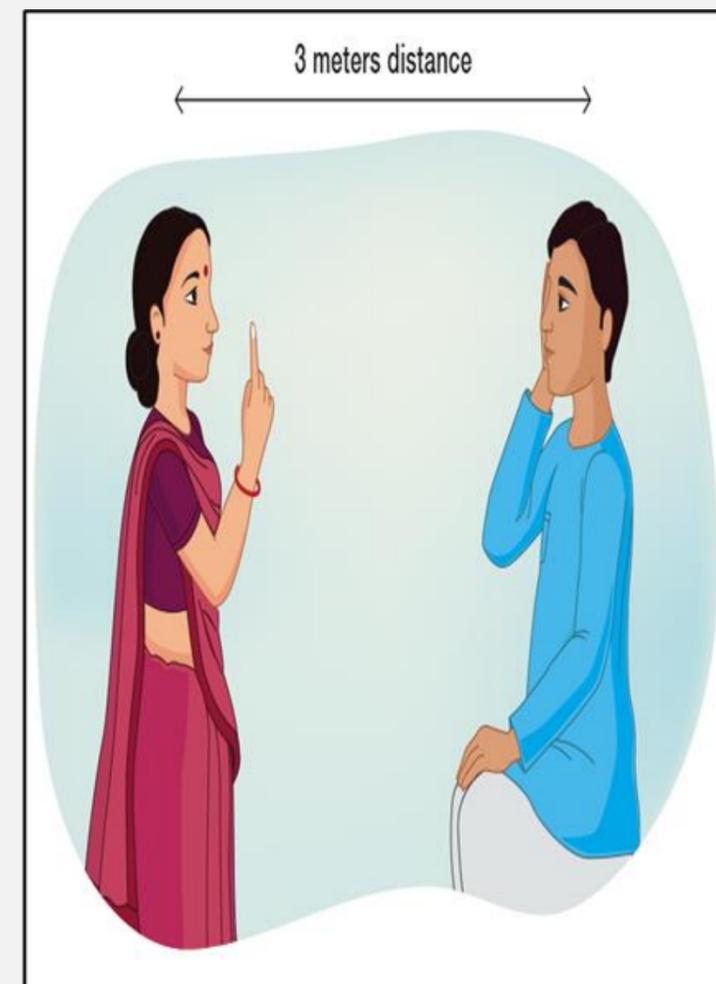


## A. How to find someone has blindness by finger counting method?

ASHA will undertake the finger counting method to check for blindness in all community members in population aged above 18 years.

**Steps to be undertaken by ASHA :** [Please refer to Training manual on Eye Care for ASHA].

Individuals who can count fingers at 3 meters (10 feet) with any one eye or both the eyes, should then be tested for distant vision using 6/18 Snellen vision chart (E chart).



**Finger Counting Method**

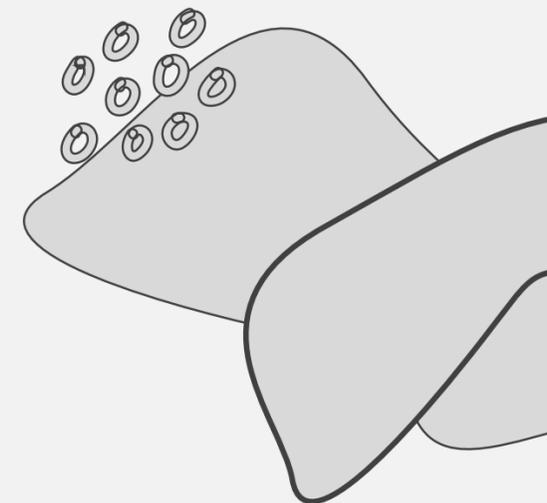
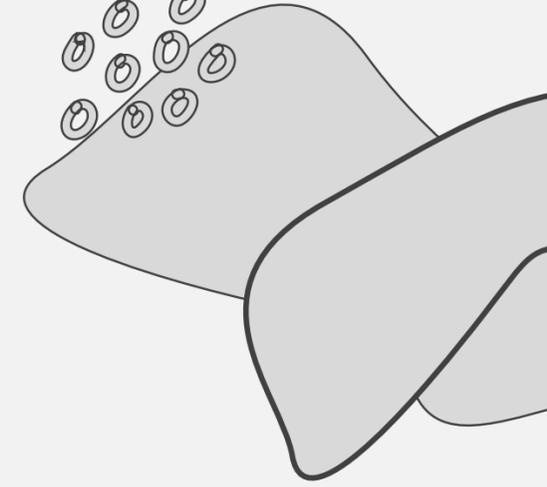


## B. Using 6/18 Snellen vision chart (E chart) for recording the distant vision of people

- A quick method to determine if distant vision is poor or is lost in any eye is the 6/18 Snellen vision chart (E chart).



Vision chart at Community Level (For ASHA- 6/18 Vision Chart)





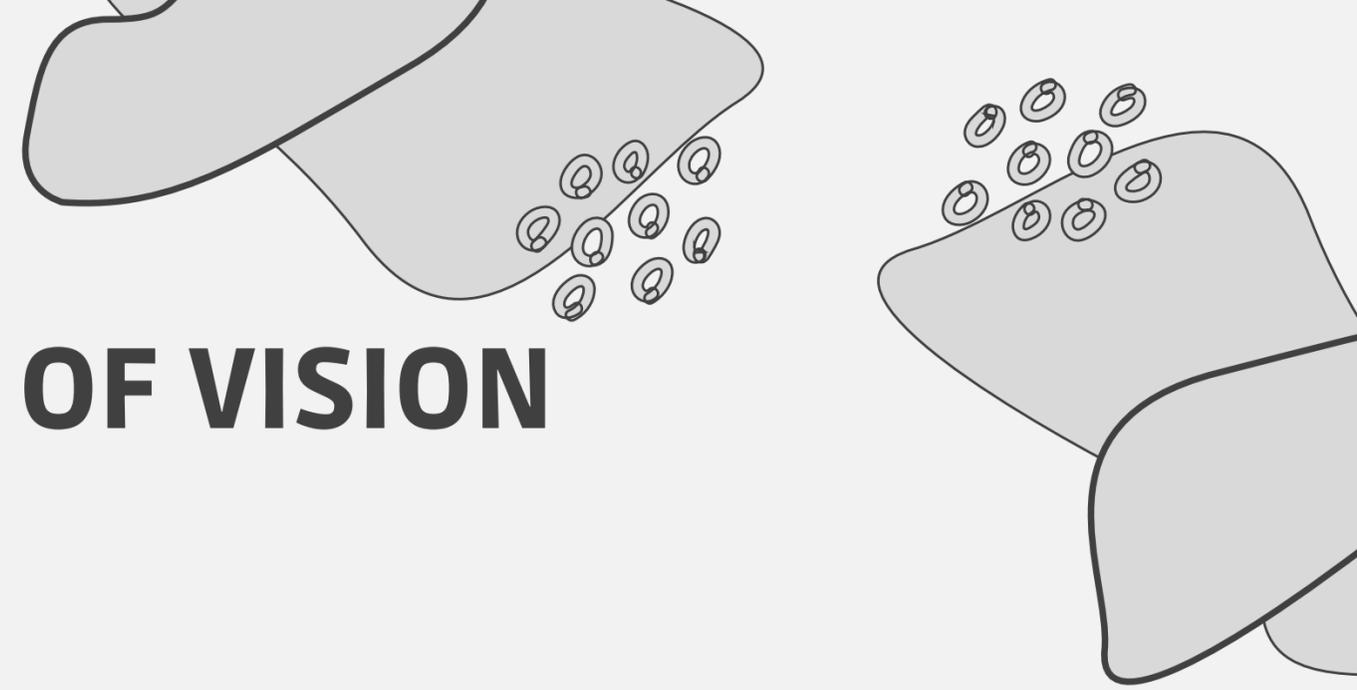
**Screening for Visual Impairment using 6/18 Snellen vision chart (E chart). Source- Dr. Rajendra Prasad Centre for Ophthalmic Sciences.**

- ASHA will undertake to screen for visual impairment using the 6/18 Snellen vision chart (E chart) at the community level of all adult community members aged above 18 years of age, who are able to count fingers by finger counting method.
- Checking Distant Vision- Screening for Visual Impairment at the community level by ASHA using 6/18 Snellen vision chart (E chart) [Please refer to Training manual on Eye Care for ASHA].





# MPW/CHO- SCREENING FOR REFRACTIVE ERRORS/TESTING OF VISION



- Testing of the Vision of an individual is done using certain vision charts.
- Separate charts are used for testing the distant and near vision.
- MPW along with the CHO will be responsible for screening for blindness and refractive errors using Snellen's chart and near vision card/chart at the AB-HWC.

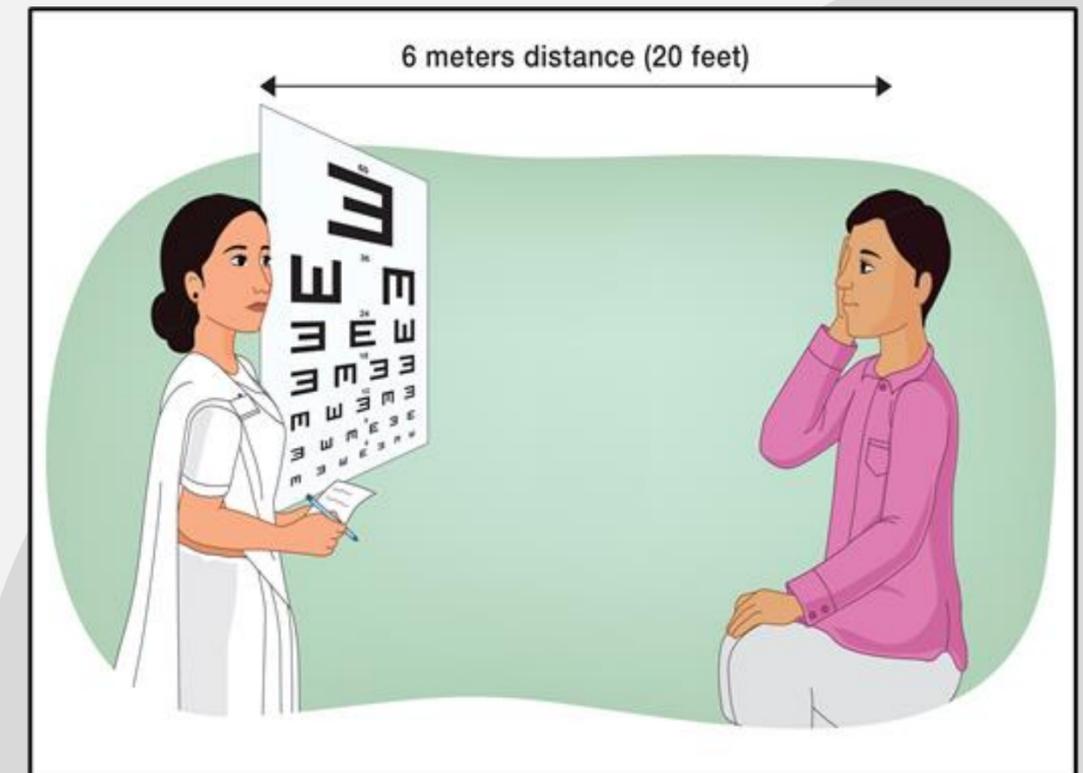
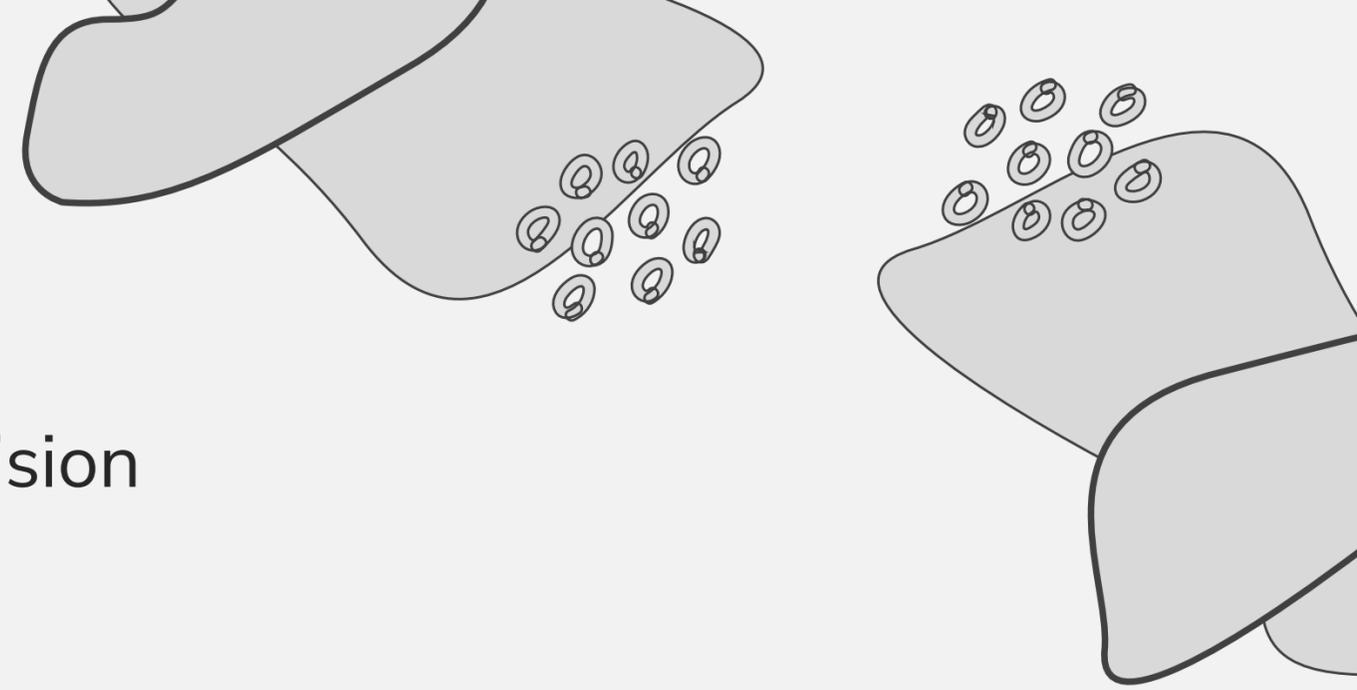




- Screening for Refractive Errors/Testing of Vision using Snellen's E chart; and
- Measuring Near Vision using Near Vision card

Steps to be undertaken by MPW/CHO at AB-HWCs

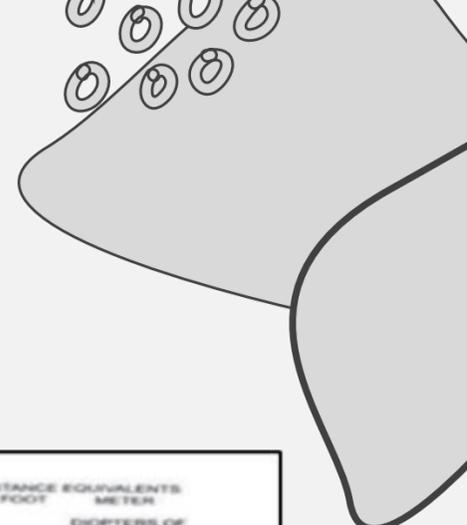
[Please refer to Training manual on Eye Care for MPW].



Screening for Testing of Distant Vision.



# EYE SCREENING TOOL TO BE USED AT AB-HWC



1. Snellen's chart

The chart displays seven rows of letters. The first row has a single large letter 'E' with the number 60 above it. The second row has two letters 'W' and 'M' with the number 36 above them. The third row has three letters 'E', 'E', 'W' with the number 24 above them. The fourth row has four letters 'E', 'M', 'E', 'E' with the number 18 above them. The fifth row has five letters 'M', 'W', 'E', 'M', 'E' with the number 12 above them. The sixth row has six letters 'E', 'W', 'M', 'E', 'E', 'E' with the number 9 above them. The seventh row has seven letters 'M', 'E', 'W', 'E', 'M', 'W' with the number 6 above them.

Snellen's Chart

NEAR VISION ILLITERATE "E" IN LogMAR SIZES FOR TESTING AT 16 INCHES (40 CM)

LETTER SIZE	DECIMAL SIZE	Log MAR	DISTANCE EQUIVALENTS FOOT	DISTANCE EQUIVALENTS METER	DIOPTERS OF ADD FOR 1 M
8.0M	.08	1.3	20/400	6/120	200
6.3M	.063	1.2	20/320	6/95	190
5.0M	.05	1.1	20/250	6/75	130
4.0M	.04	1.0	20/200	6/60	160
3.2M	.032	0.9	20/160	6/48	80
2.5M	.025	0.8	20/125	6/38	80
2.0M	.02	0.7	20/100	6/30	50
1.6M	.016	0.6	20/80	6/24	40
1.25M	.0125	0.5	20/63	6/19	30
1.0M	.01	0.4	20/50	6/15	2.00
0.8M	.008	0.3	20/40	6/12	1.50
0.6M	.006	0.2	20/30	6/9	1.00
0.5M	.005	0.1	20/25	6/7.5	0.75
0.4M	.004	0.0	20/20	6/6	0.50

NEAR VISION LANDOLT "C" IN LogMAR SIZES FOR TESTING AT 16 INCHES (40 CM)

LETTER SIZE	DECIMAL SIZE	Log MAR	DISTANCE EQUIVALENTS FOOT	DISTANCE EQUIVALENTS METER	DIOPTERS OF ADD FOR 1 M
8.0M	.08	1.3	20/400	6/120	200
6.3M	.063	1.2	20/320	6/95	190
5.0M	.05	1.1	20/250	6/75	130
4.0M	.04	1.0	20/200	6/60	160
3.2M	.032	0.9	20/160	6/48	80
2.5M	.025	0.8	20/125	6/38	80
2.0M	.02	0.7	20/100	6/30	50
1.6M	.016	0.6	20/80	6/24	40
1.25M	.0125	0.5	20/63	6/19	30
1.0M	.01	0.4	20/50	6/15	2.00
0.8M	.008	0.3	20/40	6/12	1.50
0.6M	.006	0.2	20/30	6/9	1.00
0.5M	.005	0.1	20/25	6/7.5	0.75
0.4M	.004	0.0	20/20	6/6	0.50

#108004

Near vision chart/card





# RECORDING THE FINDINGS



## SNELLEN'S CHART

The results of the acuity exam (chart reading) will determine the quality of the eyesight.

Visual acuity is sometimes expressed as 20/20, or a similar number, meaning the smallest letters accurately read on the chart.

If the person can see the E direction in the line that says 18, then you record it as RE (for right eye) 6/18. Again, if another person can see with the left eye Es in line that says 6, then you record it as LE 6/6.

It will be recorded as reading of Right Eye vision (on top)/reading of Left Eye vision (below).

*Any patient with a vision < 6/9 (less than) needs to be referred to the OA at Vision Centre/Eye Specialist/Eye Doctor at higher health facilities for further evaluation and management.*

<b>Example to record reading-</b>	
Vision (Vn)	R/E- 6/18
	L/E- 6/6

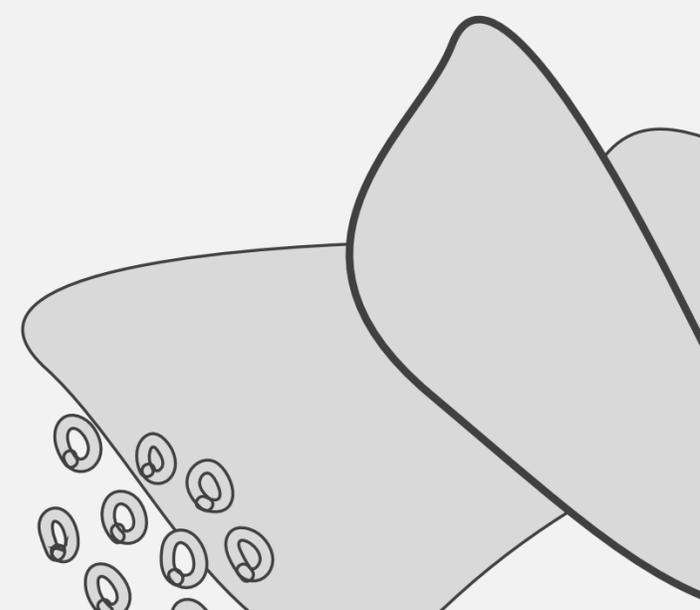
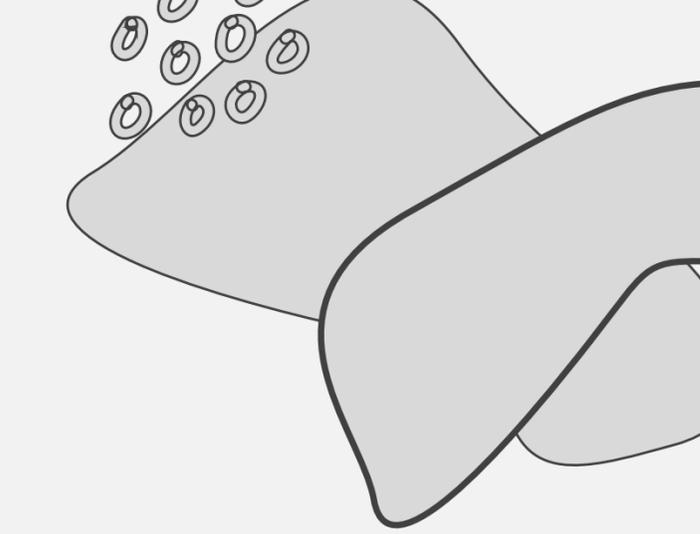
## NEAR VISION CARD/CHART

The individuals who cannot read N 12 line or below in the chart will be referred by CHO/MO heading the nearest AB-HWCs to the Ophthalmic Assistant at the Vision Centre for further health centers (MO to be informed regarding the referral).



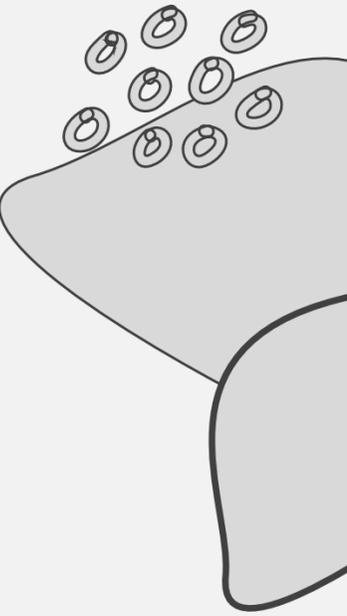


# EYE CARE SKILLS/PROCEDURES



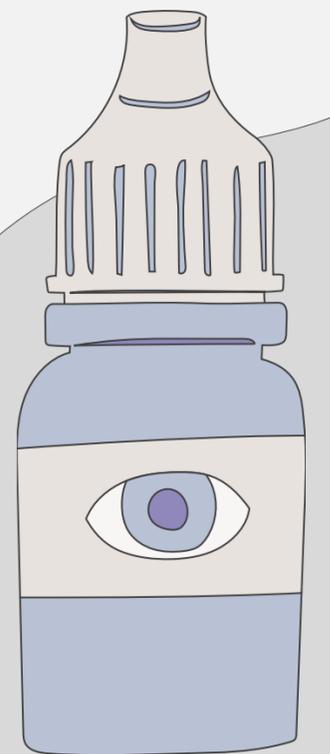


# HOW TO APPLY EYE DROPS CORRECTLY



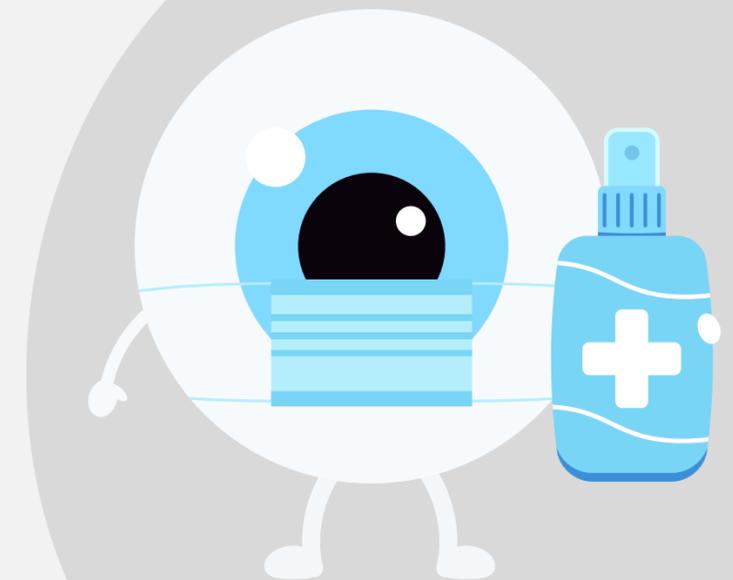
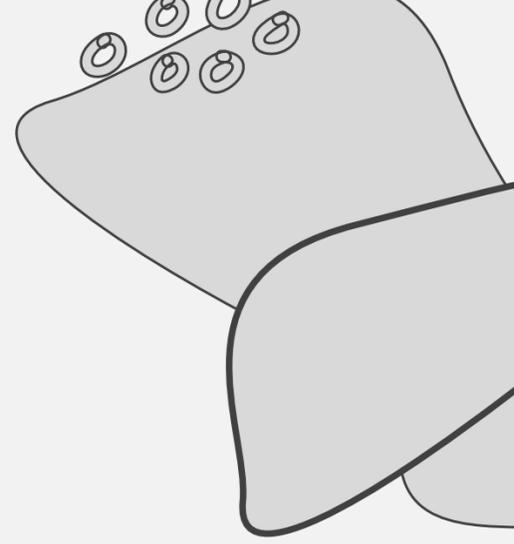
You may counsel the individual or families for following the correct steps given below while applying eye drops.

- Check for the expiry date of the eye drops and make sure that you have the correct medication.
- Wash your hands with soap and clean water before using eye drops, to prevent dirt or germs from getting into your eye.
- If you also use contact lenses, it is advisable to put your eye drops when you are not wearing contact lenses. Put them back into your eye at least 15 minutes after using eye drops.
- Do not put the eye drops directly into the eye. Tilt your head back and gently pull your lower eyelid down (this forms a pocket) with your finger. Look up





- Hold the bottle close to your eye. Do not let the bottle tip touch your eye, eyelid, eyelashes, or skin-If it does, the eye drop bottle will need to be discarded. Eye drops should be put into the eye from a distance.
- Put only one drop at a time in the pocket made. Squeeze the eye drops into your lower eyelid, without touching your eye.
- Let go of your eyelid and close your eyes. You should not keep blinking your eyes after putting the eye drop. An individual should not squeeze the eyes tightly as the eye drops will come out.

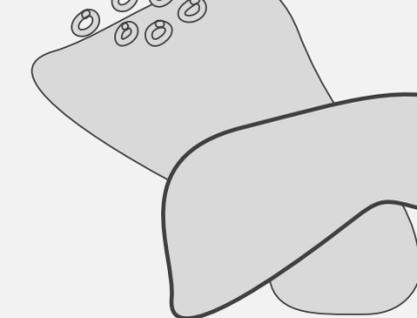
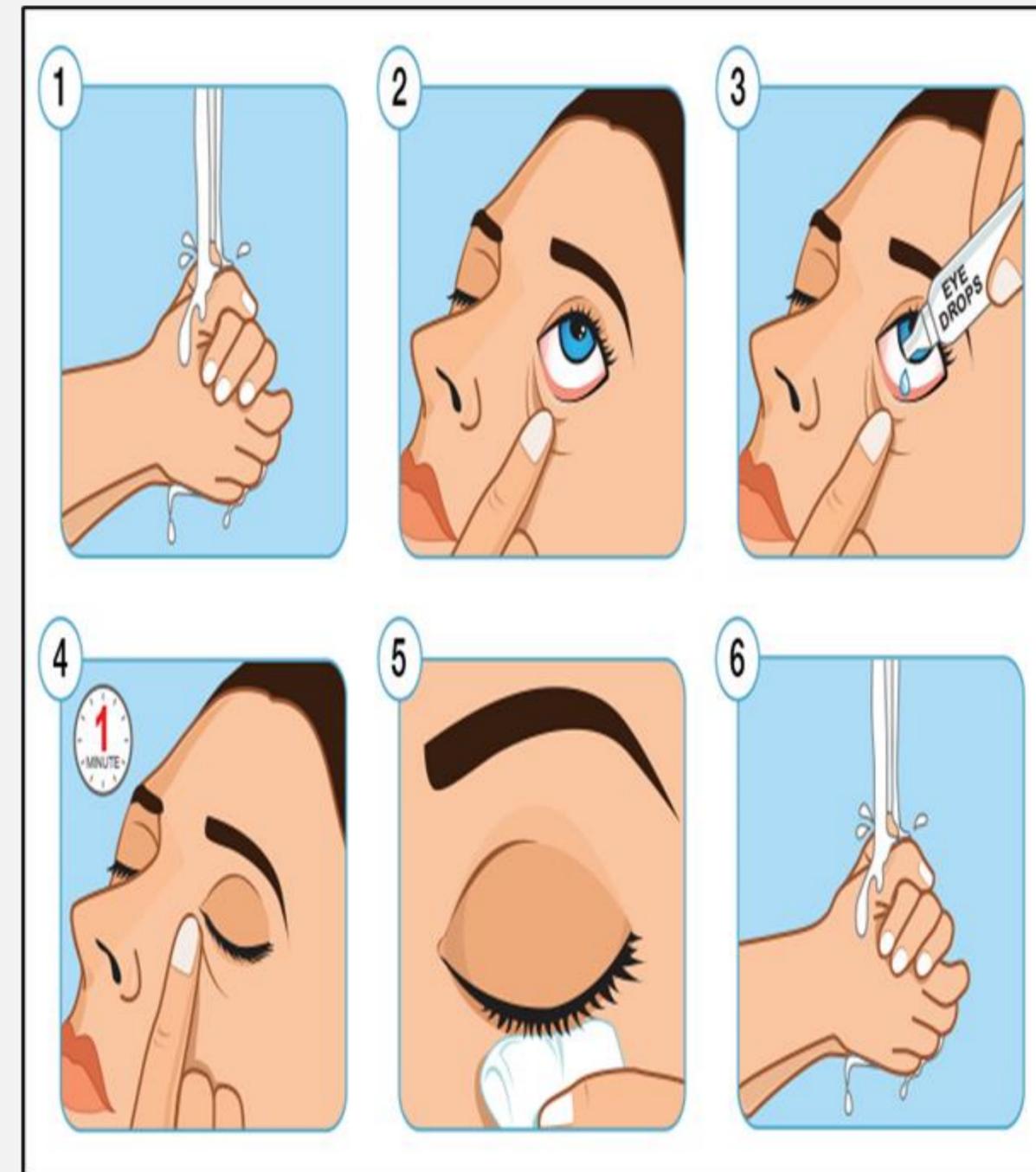




- To keep the drop for the maximum time in the eye, put some pressure on your nose with your finger near the corner of the eye. It is normal if you, sometimes, feel the taste of the eye drop in your throat.

- Keep your eye closed for about one minute after putting the eye drop.

- Now, put the eye drop in the other eye as suggested by the doctor, by following the steps given above.





- If you need to put other eye drops as well, then there must be a gap of 5-10 minutes between each eye drop.

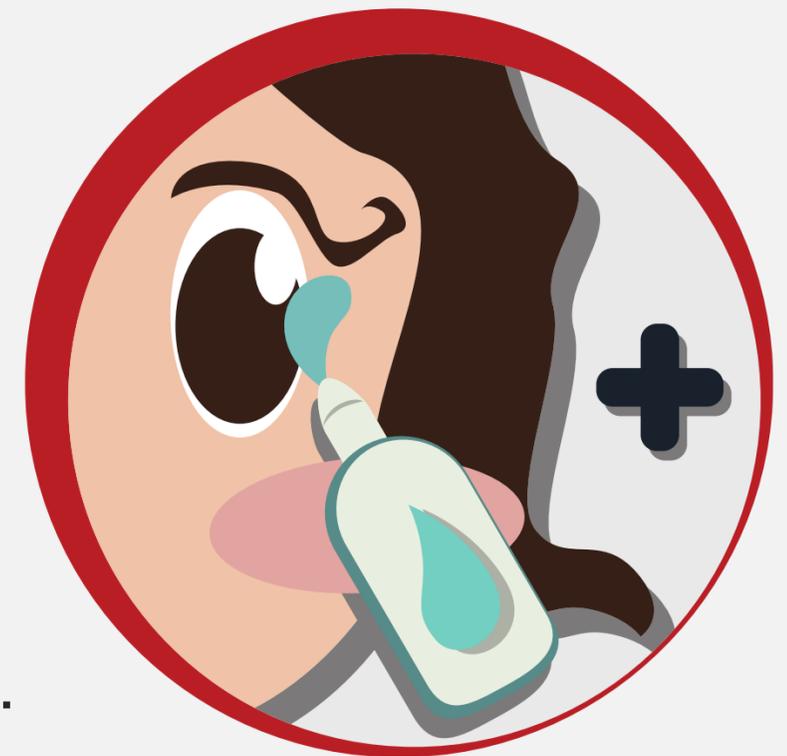
- If you need to apply an eye ointment also then make sure to use it after putting all the eye drops.

- Wash your hands with soap and clean water after using eye drops.

- Try using eye drops while sitting and while lying down, to see whether it is easier for you to apply eye drops in either position.

- Once the eye drop bottle is open, it must be used within one month.

Discard the eye drop bottle after one month of opening (even if it is not empty).





- Do not use eye drops prescribed to another person/family member.
- Be careful in using the eye drops. Do not use ear drops in the eyes.
- You must put the drops at the right time interval as suggested by your medical doctor. If you put the drops every day, you should put it at the same fixed time every day as far as possible.

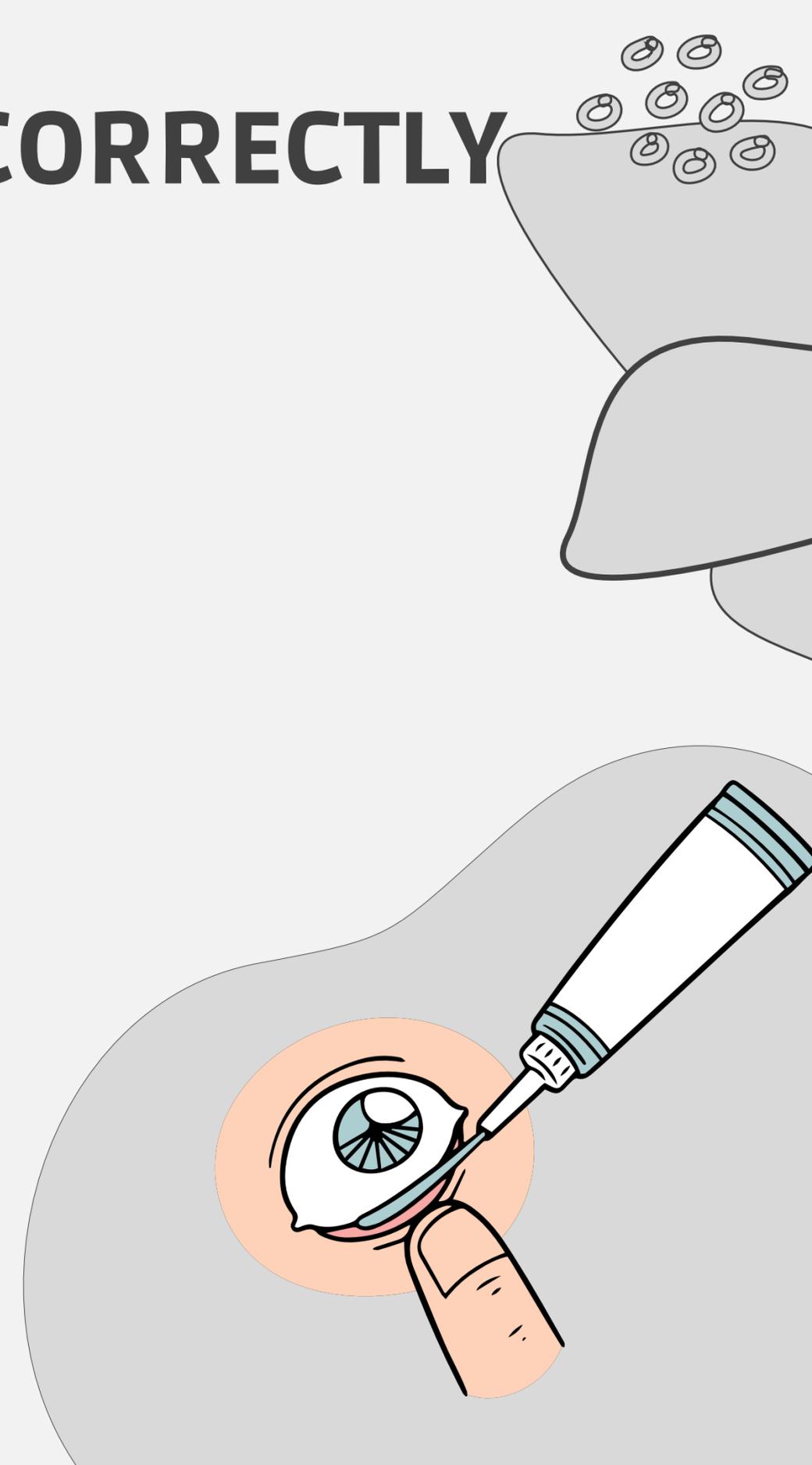




# HOW TO APPLY EYE OINTMENT CORRECTLY

You may counsel the individual or family for following the correct steps given below while applying eye ointment.

- Check for the expiry date of the eye ointment and make sure that you have the correct medication.
- Wash your hands with soap and clean water before using the eye ointment, to prevent dirt or germs from getting into your eye.
- Do not put the eye ointment directly into the eye. Tilt your head back and gently pull your lower eyelid down (this forms a pocket) with your finger.
- Look up.





- Hold the eye ointment close to your eye. Do not let the tip of the ointment tube touch any part of your eye (eyelid or eyelashes). If it does, the ointment tube will have to be discarded.

- The quantity of the eye ointment should be just enough (like the size of rice/wheat grain). Do NOT apply the eye ointment as applying kajal.

- Let go of your eyelid and close your eyes. You should not keep blinking your eyes after putting on the eye ointment. An individual should not squeeze the eyes tightly as the eye ointment will come out. Wipe away any surplus ointment which may come out.

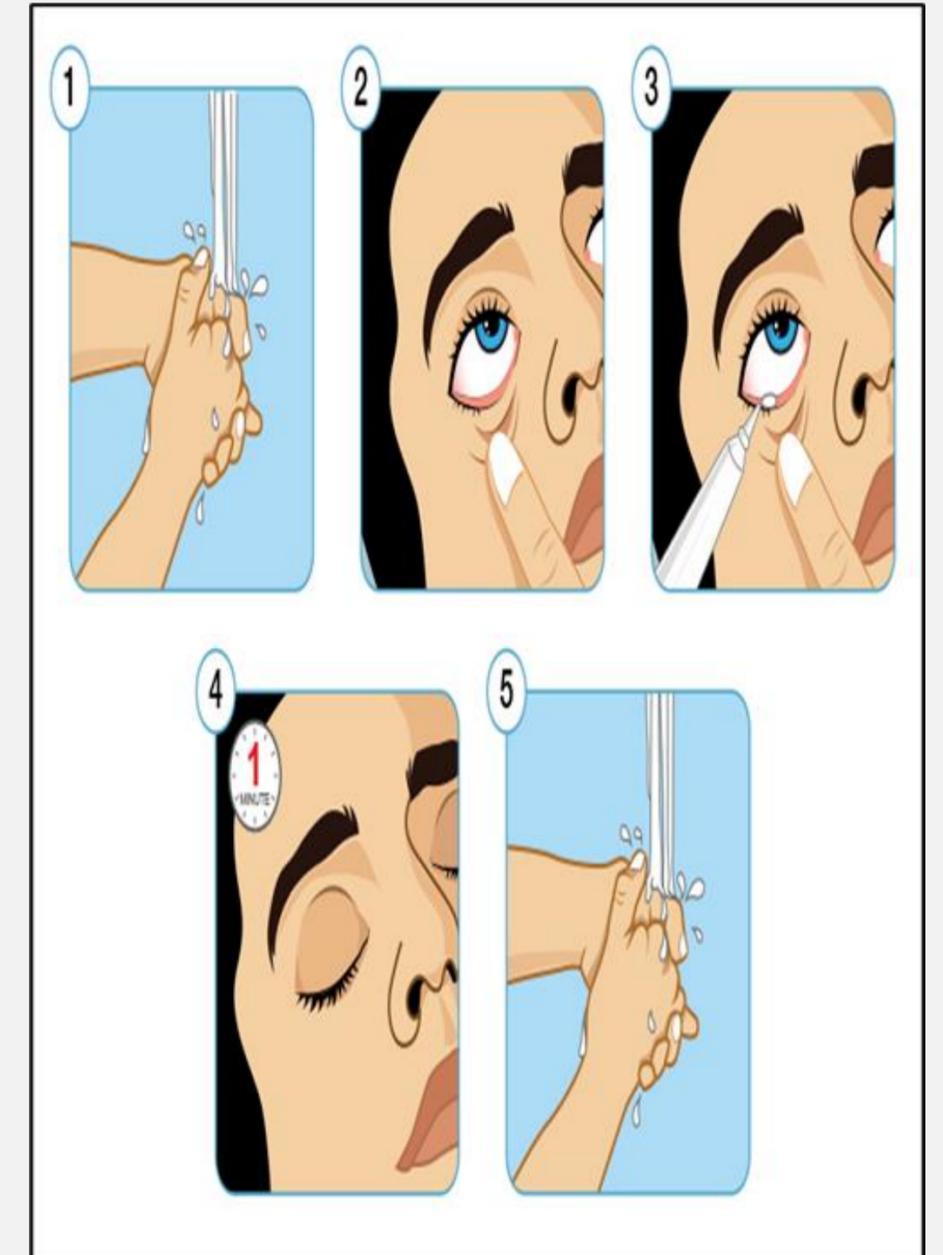
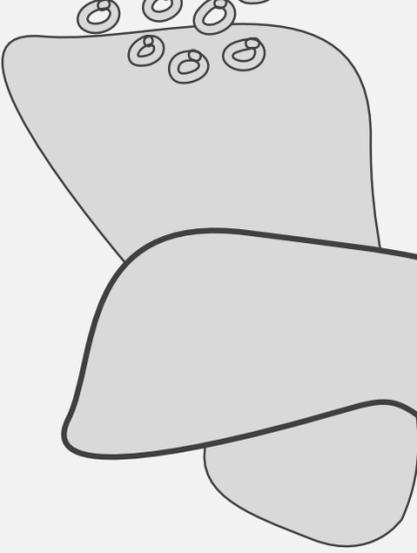




- Keep your eye closed for about one minute after putting the eye ointment in one eye. Then, put the ointment in the other eye if suggested by the doctor by following the above steps.

- Wash your hands with soap and clean water after using the eye ointment.

- The eye ointment should be applied only after putting all the eye drops.



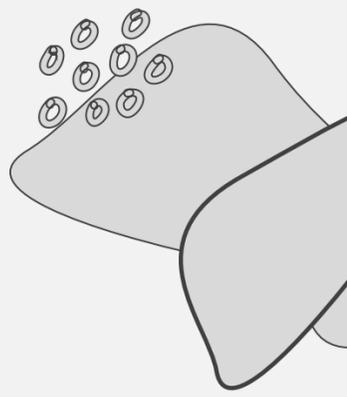


- Explain to the individual that their vision will be blurry (not clear) for a few minutes.
- Close the cap of the ointment tube. Once the eye ointment is open, it must be used only for one month. Discard the eye ointment tube after one month of opening (even if it is not empty).
- Do not use eye ointment given to another person/family member. You must put the eye ointment at the right time interval as suggested by your medical doctor.





# HOW TO CLEAN EYELIDS AND EYES IN CONJUNCTIVITIS AND POST-OPERATIVE CATARACT SURGERY



- Use sterile gauze or small cotton balls.
- You need saline and/or clean water.

## Top lid

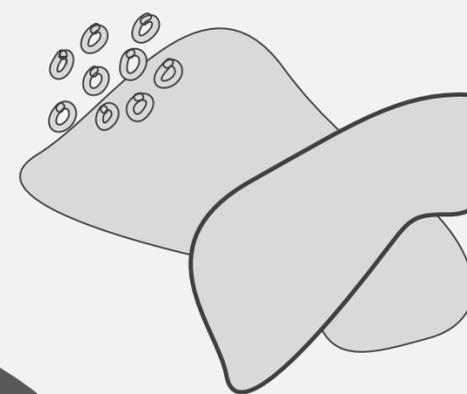
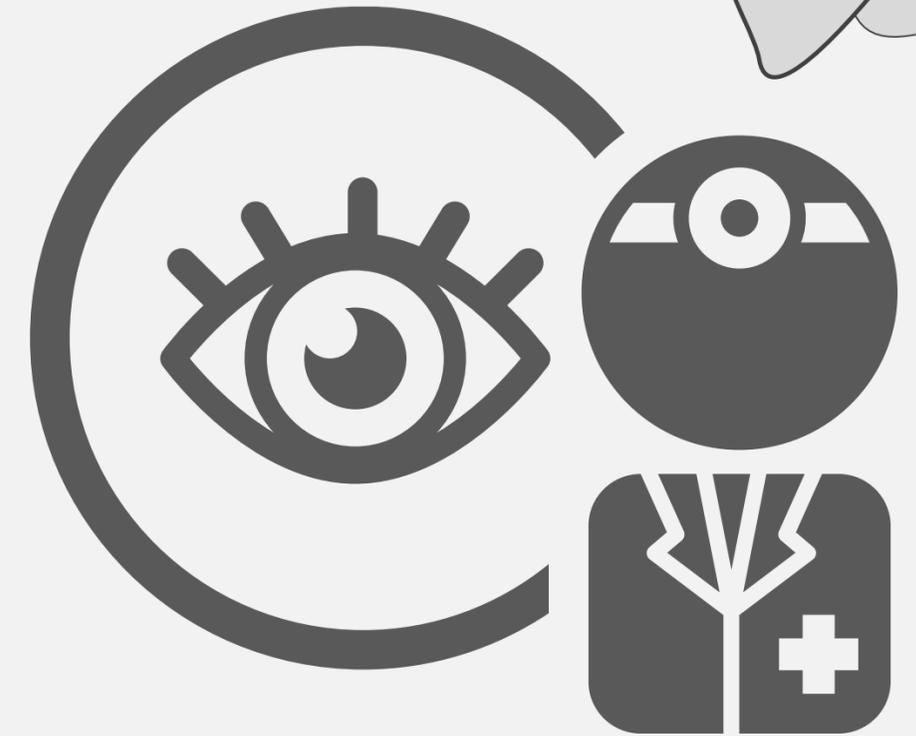
- Take a folded gauze swab or cotton bud.
- Moisten the swab or bud with saline or water.
- Ask the patient to close both eyes.
- With the swab or bud, clean gently along the eyelashes in one movement from the inner to the outer canthus.
- Discard the swab or bud after use. If the eyelashes need further cleaning use a new swab or bud.





## Bottom lid margin

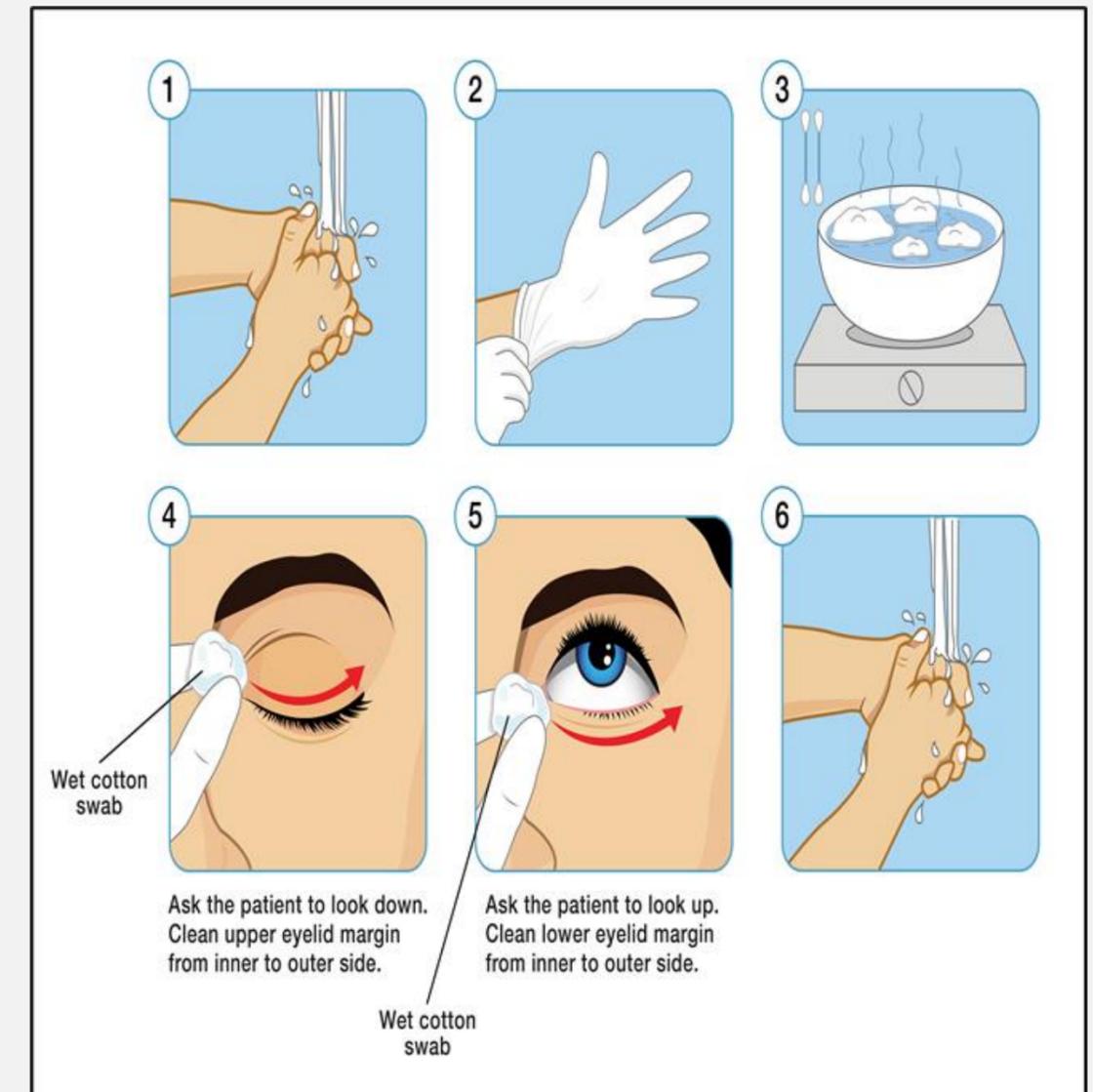
- Ask the patient to look up.
- With one hand take a moistened sterile swab or bud.
- With the index finger of the other hand gently hold down the lower eyelid.
- With the swab or bud clean gently along the lower eyelid margin in one movement from inner to the outer canthus.
- Discard the swab or bud after use. If the lower eyelid margin needs further cleaning use a new swab or bud.



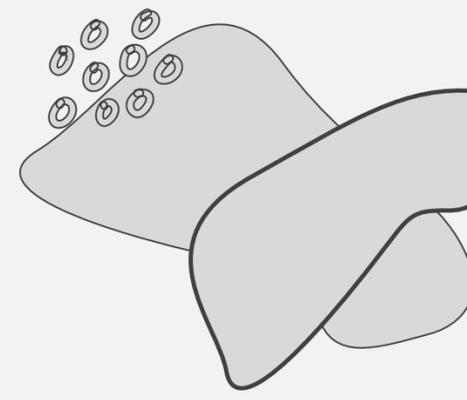


## Top lid margin

- Ask the patient to look down.
- With one hand take a moistened sterile swab or bud.
- With a thumb or a finger of the other hand gently ease the upper eyelid up against the orbital rim (just below the eyebrow).



**Remember - always use a new swab or bud each time!**



- With the swab or bud clean gently along the upper eyelid margin in one movement from the inner to the outer canthus.
- Discard the swab or bud after use. If the upper eyelid margin needs further cleaning use a new swab or bud.

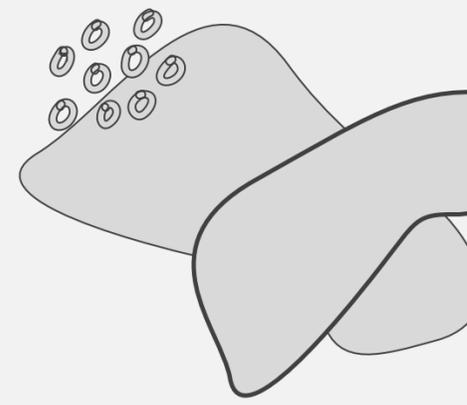
### **Eyelid Cleaning Tips**

- Extra care is needed when cleaning the upper eyelid. Try to keep the cornea in view throughout and avoid touching it with the gauze swab or cotton bud.
- It may be necessary to repeat any part of the above procedure if the eyelids are very sticky until all debris/discharge is removed.





# APPLYING DRY WARM COMPRESS FOR STYE

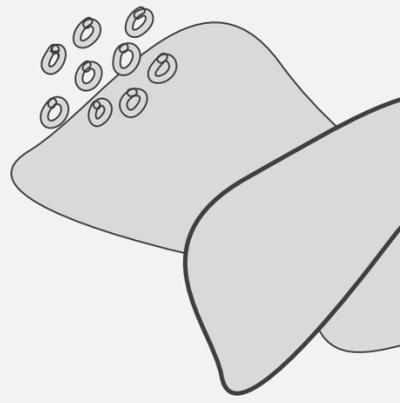


- Boil water in a vessel and put a clean cloth under/or on the side of the vessel to warm the cloth. Iron if available at home, can also be used for warming the cloth.
- Touch and see if the cloth is warm with your hand (back of the hand).
- Do not use wet warm compresses for the eye.
- Avoid excessively hot compresses (in order to avoid scalding, particularly in children).
- Continue to give a warm compress to the affected eye for 5–10 minutes.
- Repeat three to four times daily.

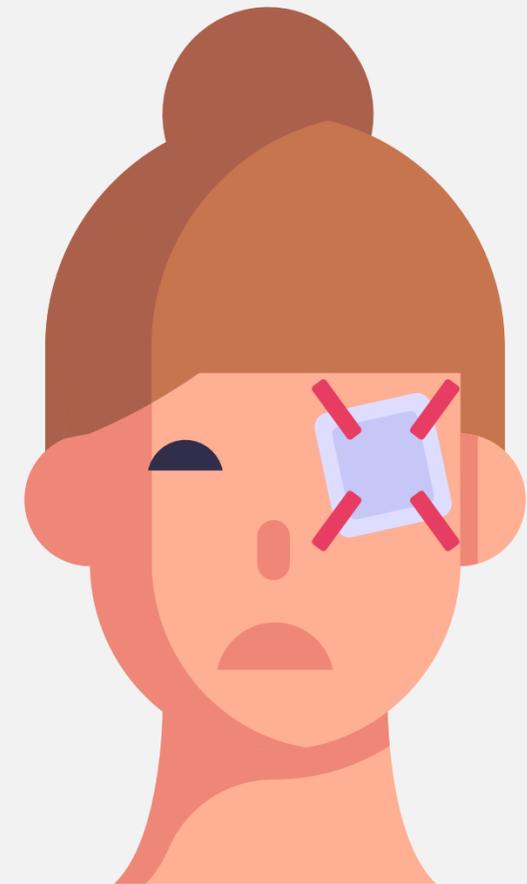




# APPLYING AN EYE COVER OR PAD FOR EYE INJURIES

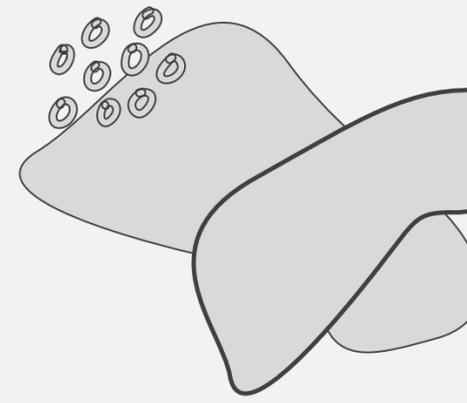


- Instruction- Ask the patient to try not to open the affected eye under the pad.
- Requirements/ Material:
  - stainless steel tray with tape,
  - sterile cotton/swabs,
  - gauze pad cut into a circle shape,
  - pair of scissors and gloves.

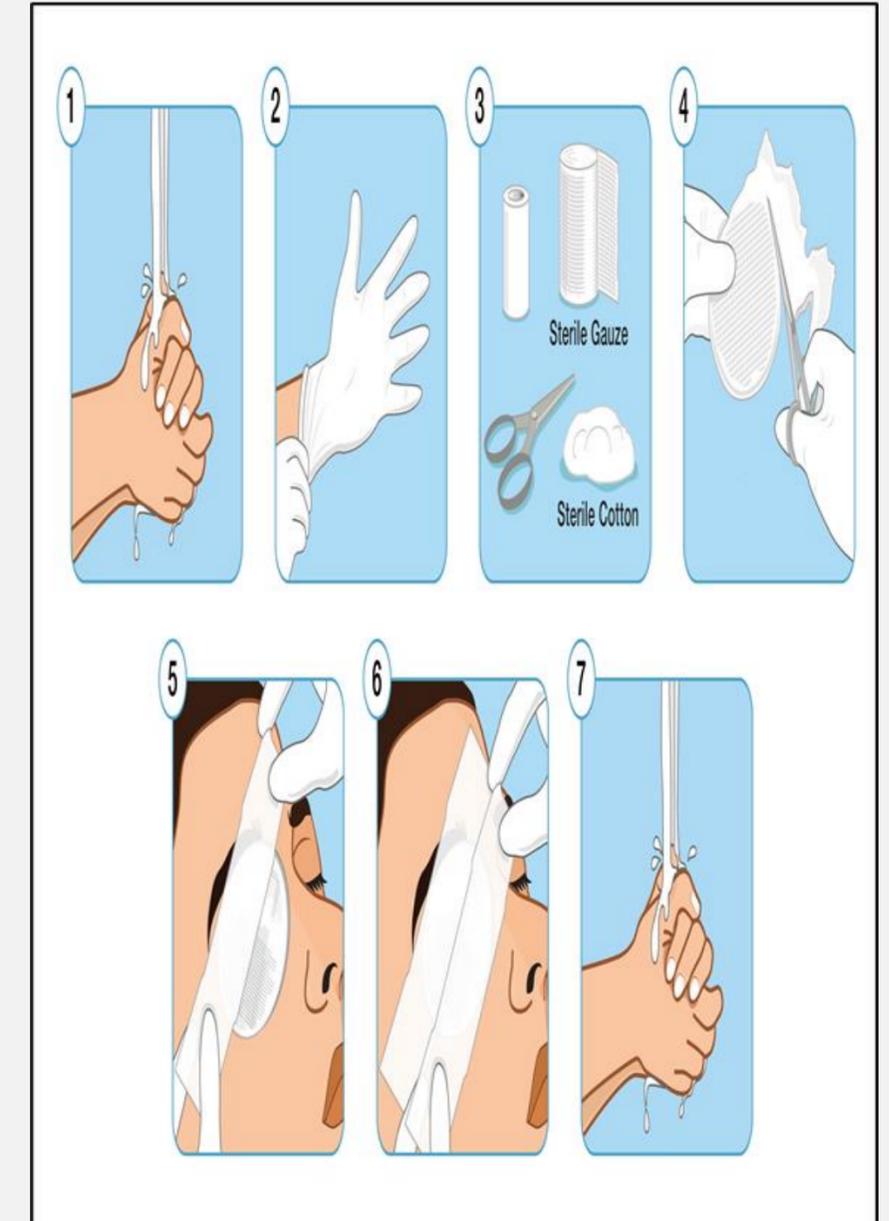




# APPLYING AN EYE COVER OR PAD FOR EYE INJURIES

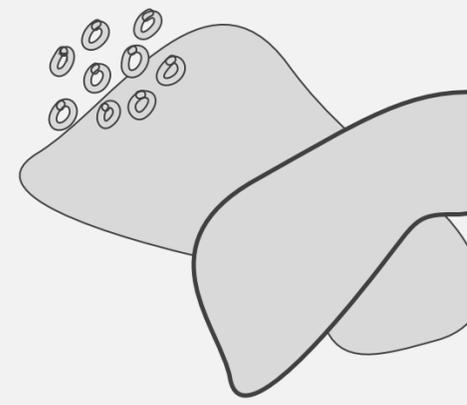


- Wash your hands with soap and clean water. Wear gloves. Make the gauze eye pad by putting cotton between 2 pieces of gauze. Then cut it in a circular shape.
- Apply a piece of adhesive tape over one side of the gauze pad, as shown in the picture.

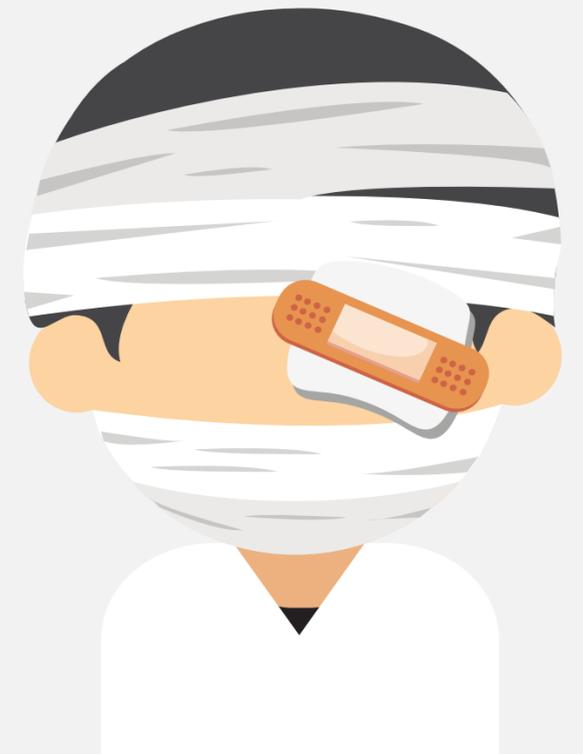




# APPLYING AN EYE COVER OR PAD FOR EYE INJURIES



- Ask the patient to close both eyes.
- Position the eye pad diagonally over the closed lid and secure the tape to the patient's forehead and cheek.
- Apply a second and third piece of tape, to ensure the eye pad lies flat.
- Eye protection can also be provided with a readymade eye cover or a shield.





# Thank You

