

Vision Clinic Overview

The information below is specific to questions we frequently receive from eye care professionals. Information that is applicable to all volunteers including check-in and orientation times, a clinic map, as well as reference materials such as sample patient records, can be found at seattlecenter.org/skclinic/orientation. **Please take time to review them!**

Vision Services

Seattle/King County Clinic offers visual acuity tests, refraction, slit lamp exams, glaucoma screening, pupil dilation, readers (+1.0 to +3.5 in half-step increments) and prescription eyeglasses. Patients can bring an eyeglass prescription (less than 2 years old) and, if approved by a Vision/Optical Director, skip triage as well as the eye exam to just receive prescription eyeglasses.

What is Provided & What to Bring

Equipment and instruments:

- Auto Lensometers
- Autorefractors
- BIOs, 20D Lenses & 90D Lenses (a couple)
- Eyeglass Adjustment Tools
- Frame Warmers
- Manual Lensometers
- O.C.T.
- Ophthalmoscopes (a few)
- Penlights
- Phoropters/Refracting Lanes
- Pupilometers
- Retinoscopes (a few)
- Slit Lamps
- Tono-Pens & Probe Covers
- Tumbling E Charts

Onsite medications: Proparacaine 0.5%, Mydriatic 2 (Tropicamide 1% & Phenylephrine 2.5%), Cyclopentolate 1%, Fluorescein Strips, Klarity Ophthalmic Solution (Glycerin 1%), Nonmedicated Eye Drops.

Please bring:

- Your own BIOs, fundus lenses (20D & 90D), retinoscope, as desired
- Other preferred equipment, as desired
- Your NPI#, as appropriate

Keep your belongings safe by labeling them with your name and keeping track of them throughout the day. We are not responsible for articles that are damaged, lost or stolen.

What to Expect

When patients arrive in the vision clinic, they will have been through Patient Registration and Patient Intake. Patients can be identified by a colored wristband with the date printed on it; patient companions will have a white wristband with the date printed on it.

Clinic patients receive eye care services by progressing through a series of stations according to their needs. All patients need to conclude their visit at Vision Checkout.

Vision Record – Important Steps & Required Documentation

NO PATIENT IS TO RECEIVE SERVICES WITHOUT A BLUE VISION RECORD (a sample is available at seattlecenter.org/skclinic/orientation). If a patient is missing the form, please send them to Vision Checkout so it can be resolved.

Volunteers staff each station according to the professional expertise required. If possible, a single volunteer will remain with a patient from Station 2 - 4. Volunteers need to sign on the front page of the patient record when a service is completed.

- Station 1 - Vision Triage
- Station 2 - Autorefractometry
- Station 3 - Visual Acuity
- Station 4 – Lensometry
- Station 5 - Refraction, Confrontational Exam, EOM
- Station 6 – Tonometry
- Station 7 - Dilation
- Station 8 – Slit Lamp
- Station 9 - OCT Exam
- Station 10 - Optical
- Station 11 - Frames Drop Off
- Station 12 – Vision Checkout

When you initially meet a patient, please review their health history on the **separate Patient Intake Record in the patient's green folder** to note any existing conditions that may need to be explored further. Also **review findings** from providers at other vision stations **on the Vision Record**.

Remember to **be attentive to communicable issues** so we don't cross-contaminate equipment and conditions like narrow angles, so we don't cause the patient unnecessary pain. Signs and symptoms of acute angle closure (severe eye pain, nausea and vomiting, headache, blurred vision, seeing haloes around lights, profuse tearing, etc.) should be attended to immediately.

Once you have completed a patient procedure, please be sure to **fill out all sections of the Vision Record relative to the treatment provided**. This will be reviewed during the onsite orientation and **written prompts are in the Vision Record** itself. This is important for tracking services provided at the Clinic and for ensuring proper follow-up care.

For doctors who will be doing refractions, it is imperative that everyone **write neatly and clearly**. **All spectacle Rx will need to be in a 3-digit format for sphere, cylinder, and axis** (i.e., OD -2.00 -0.75 x 010). Technicians performing refraction will need to have their refractions signed off on by an OD or MD.

For opticians who will be doing spectacle Rx orders, it is also imperative that you **write neatly and do not use abbreviations for sphere, cylinder, axis etc.**, as non-clinical volunteers will be entering this information into the Essilor ordering system and will not know how to interpret abbreviations. Also **document the frame style, size, color, name etc. as completely as possible** to aid in replacement if damage should occur in transit or during fabrication.

DO NOT promise patients can come back on a subsequent day, without receiving authorization from a Vision Director.

Clinic medication prescription pads are available from Vision Checkout. **DO NOT** pre-sign the prescription sheets. Please pay attention to legibility and completeness of the written prescription. Be sure to **also write the prescription in the patient record**. **Keep a close eye on prescription pads**; unused and carbon copies need to be **returned to Vision Checkout at the end of each day**. It is our policy **not to prescribe opioids**.

Providers may use the white form included in the patient's green folder called **Healthcare Resources & Visit Recommendations** (a sample is available at seattlecenter.org/skccclinic/orientation) to make notes for patients about their treatment, recommend onsite resource services such as social work or health insurance assistance, and/or recommend offsite resources and educational materials that may benefit the patient. Depending on staffing levels, healthcare resource providers may not be in the vision area, but patients can always access these resources in McCaw Hall.

Remind patients it is important to turn in their blue Vision Record at Vision Checkout. Checkout volunteers will ensure the patient understands any post-care instructions, that their Vision Record is complete and process any referrals before releasing the patient. They will seek providers for clarification as required; please be responsive to their requests.

Student Participation Parameters:

Seattle/King County Clinic is not an accredited educational program. We welcome health profession students however participation in a clinical capacity varies by discipline and student involvement in direct patient care is **limited to the parameters established by Clinic Leadership**. Students, clinical volunteers, and faculty are advised:

- Students should not extend beyond the scope of responsibilities of their registered Clinic assignment, whether clinical or non-clinical in nature.
- Students who are licensed/credentialed in a clinical field should not extend beyond the scope and limits of their current license/credential.
- Licensed/credentialed volunteers and faculty are not permitted to redirect students to any role or capacity beyond their registered Clinic assignment.
- Any questions about the parameters of student participation should be directed to Clinic Leadership.

Emergencies, Injuries & Behavioral Health

- EMT's will be on site in the event of an emergency. Immediately notify the nearest Seattle/King County Clinic leadership team member in a green or orange SKCC t-shirt if an emergency occurs.
- Notify the nearest Lead in an orange or green t-shirt in the event of any injury or accident.
- Alert a Clinic Lead if you need behavioral health support or security.

Additional Questions & Information

This document cannot possibly cover all details about the Clinic. Please do not hesitate to direct additional questions to Clinic Leadership. Thank you again for your contributions and compassion!