



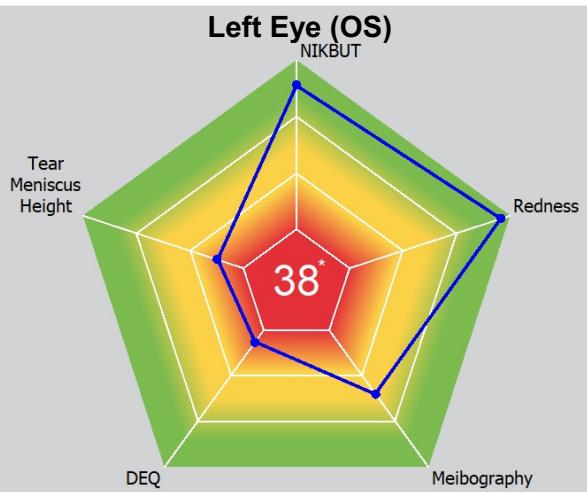
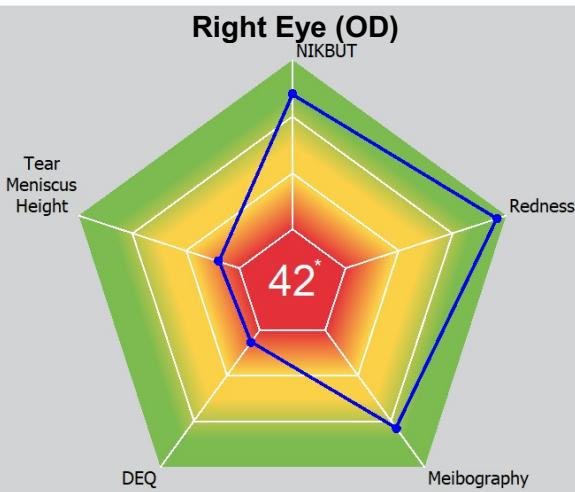
JENVIS PRO Dry Eye Report

29-12-2025 | 13:26

Patient name:
SHRESTHA, YOSHUTA

Date of birth:
30-12-2001

Patient ID:
008915

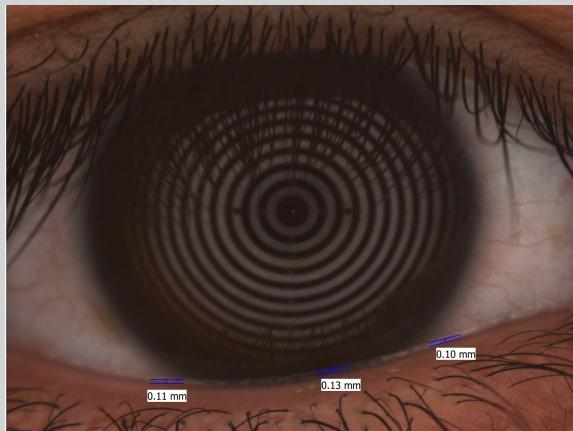


*Relative area 42/100

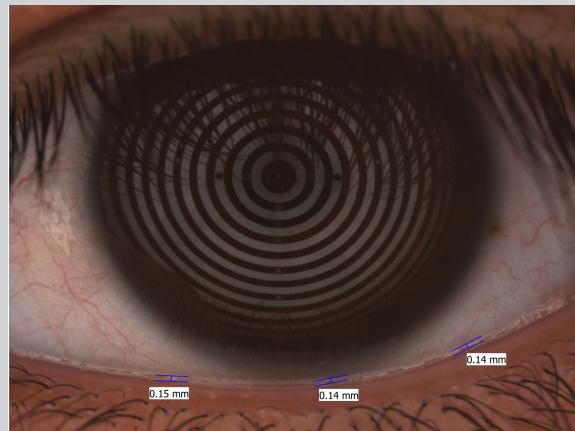
*Relative area 38/100

RECOMMENDATION

TEAR MENISCUS HEIGHT (NIKTMH, NON-INVASIVE MENISCOOMETRY)



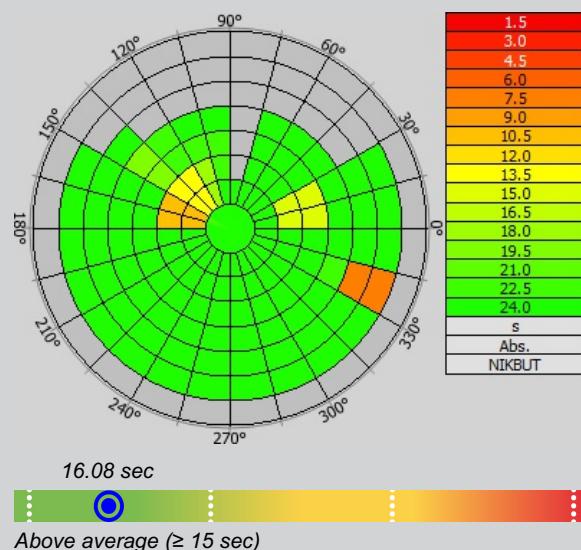
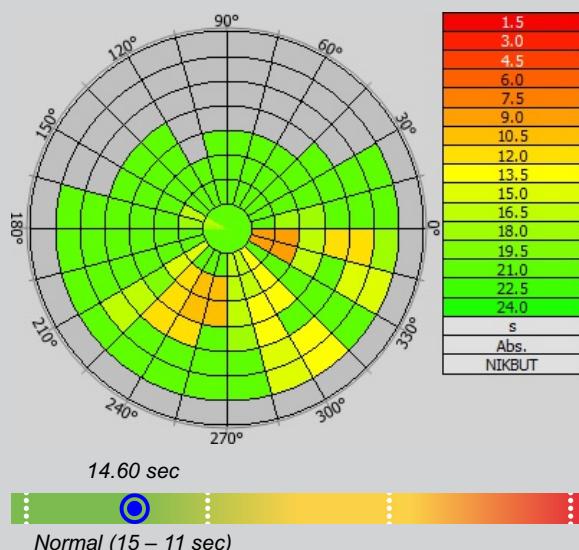
0.12 mm
Low (< 0.15 mm)



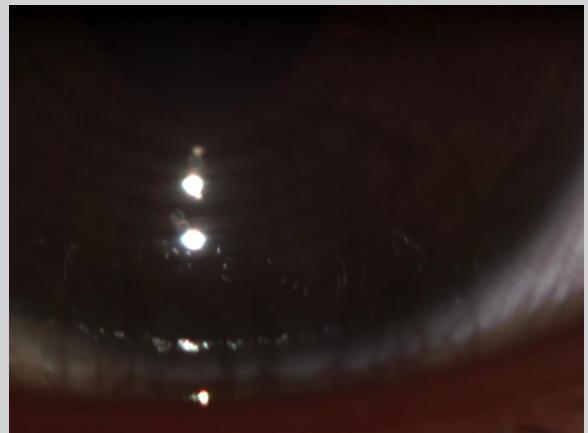
0.15 mm
Low (< 0.15 mm)

The tear quantity in a patient's eye can be measured by the height of the tear meniscus, which is visible between the ocular surface and the adjacent lid margin. The tear meniscus height has been determined without glare and non-invasively using infrared light. As a guideline, values of less than 0.2 mm indicate a low tear quantity.

NIKBUT (NON-INVASIVE TEAR FILM BREAKUP TIME)



The tear film is, among other things, responsible for reducing the friction during blinks and for maintaining the good optical quality of the eye. It is therefore crucial that the tear film remains stable between blinks. A tear film that is stable for less than 10 seconds may contribute to symptoms of dry eye or a burning sensation. Insufficient tear film stability can also be reason for fluctuating vision due to the reduced optical quality. This measurement was conducted non-invasively without applying any tearfilm vital dyes.

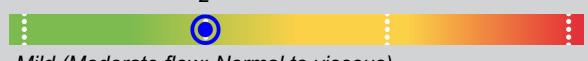
TEARFILM-DYNAMIC

2



Mild (Moderate flow: Normal to viscous)

2



Mild (Moderate flow: Normal to viscous)

Numbers of tearfilm particles (desquamated epithelial cells, blisters, muggines, proteins, ...) as well as particle velocity after blink can signify unbalanced or unhealthy tear film.

INTERFEROMETRY

1



Normal (Yellowish-greyish hue: Lipid at equilibrium)



1



Normal (Yellowish-greyish hue: Lipid at equilibrium)

The tear film consists of multiple layers. The outermost layer, the one exposed to air, is a lipid layer that plays an important role in preventing the evaporation of the aqueous layer of the tear film. The lipid layer thickness can be assessed using a technique called interferometry. The color palette of the tear film interference pattern gives an indication of the lipid layer thickness. Contact lens wearers with an increased lipid production may experience higher deposits on their lenses which may require the use of special cleaning solutions.

LASHES

2



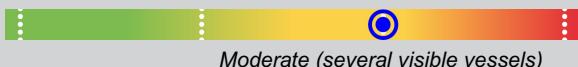
2



Eye lashes provide mechanical protection for the sensitive ocular surface. Sticky, crusty eye lashes or loss of lashes can be a sign of irritation of lid margins. Additional redness often indicates inflammation of lid margins (Blepharitis). These symptoms can also be caused by parasites.

TELANGIECTASIA

3

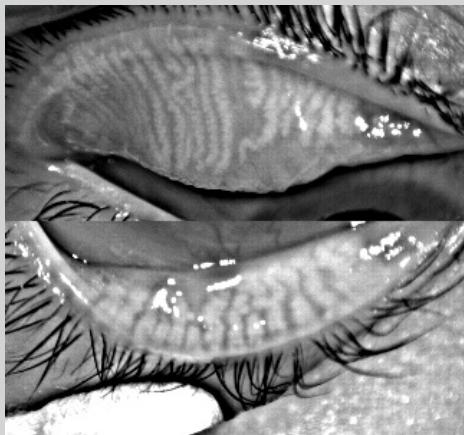


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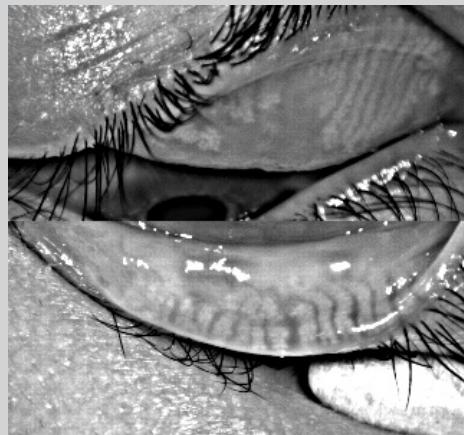


Besides swollen lids, reddened lid margins are a sign of irritated lids. Commonly this process starts with tiny, red shine through vessels with a diameter < 0.1 cm. The telangiectasia can cause inflammation of the lid margins which impairs the functionality of Meibomian glands.

MEIBOGRAPHY



Grade 1.2



Grade 2.1



The meibomian glands are located in the upper and lower eyelid. These glands produce an oily substance that plays a crucial role in preserving the eye's tear film stability, as this oily substance helps preventing the evaporation of tears and thus symptoms of dry eye. When assessing the meibomian glands, only the gland orifices (or openings) can be seen at the lid margin with a biomicroscope. The actual glands can only be visualized by means of meibography, an imaging method using infrared light.

REDNESS



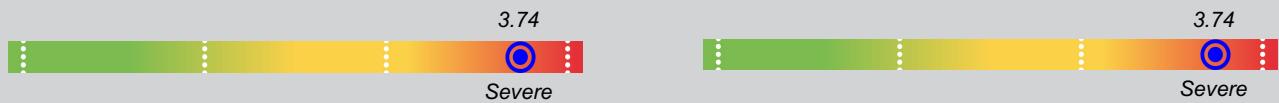
0.17



0.17



Ocular redness can be caused by a number of factors, including ocular dryness, mechanical friction, allergies, inflammation, contact lens solutions containing preservatives, topical medications or environmental factors. Redness levels of approximately grade 1 (on a 0 to 4 scale) are typically considered normal.

JENA DRY EYE QUESTIONNAIRE

The patient's perception of their ocular dryness is typically assessed by means of symptom or dry eye questionnaires. By answering specific questions related to ocular dryness symptoms, the severity of dry eye can be estimated. The classification of dry eye severity depends on the questionnaire being used.

DISCLAIMER: The material provided in the JENVIS Dry Eye Report is for informational purposes only. It is not intended to be a substitute for professional medical advice, diagnosis or treatment. Always seek the advice from your eye care provider with any questions you may have regarding a medical condition or treatment and before changing your current health care regimen.