

XYZ, O.D.,RE: ABC,DOB: MM/DD/YYYY, Dear Dr.

XYZ:, Thank you for your kind referral for patient ABC. Mr. ABC is being referred for evaluation of glaucoma. The patient states he has no visual complaints., On examination, the patient's visual acuity is 20/20 bilaterally. The patient's visual fields are full to confrontation. Extraocular muscles are intact. There is no relative afferent pupillary defect and applanation pressures are 15 mmHg bilaterally. On slit lamp examination, the patient has a normal anterior segment with 1+ nuclear sclerosis. On dilated examination, the patient has a cup-to-disc ratio in the right eye of 0.4. Macula, vessels, and periphery were within normal limits. On the left eye, the patient has a cup-to-disc ratio of 0.3 and macula vessels and periphery are also within normal limits. On gonioscopy, the patient shows deep anterior chamber angle OU and is open to the ciliary body band 360 degrees., In conclusion, my initial impression is that Mr. ABC does not have glaucoma. He has fairly symmetric and small cup-to-disc ratios OU. His intraocular pressures were within normal limits in our office today. I discussed at length with him the alternatives of observation versus continued work-up and testing. He seemed to understand very well and went with my recommendation to continue observation for now. We will take fundus photos of his optic nerves for future comparison, but I think given the lack of any strong findings suspicious for glaucoma, we will defer further testing at this time., Should you have any specific questions or any other information that you think that I may not have included in this evaluation, please

feel free to contact me. I have recommended him to follow up with you for continued examination, continued check-ups, and should you find any other abnormal findings, I would be happy to address those again.,Again, thank you for your referral of Mr. ABC.,Sincerely,,