

RETINA WELLNESS REPORT FOR BLINDNESS PREVENTION

PATIENT INFORMATION

Satish praveen

UID: 1927255909

Gender: Female

Age: 23 Yrs

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Phone: 9999999999

Exam Center: web_ac_site_rw_icdr

PATIENT HISTORY

Visit Date: Tue,12 Nov 2019,11:05 AM

Diabetic Status: None

Ophthalmology History: Not Available

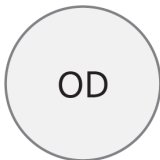
Glaucoma Status: Not Available

Reason for Consultation: Not Available

Other Relevant Information: Not Available

Ocular History: Not Available

OPTOMETRIC INFORMATION



NA	- SPH -	NA
NA	- CYL -	NA
NA	- AXIS -	NA
NA	- ADD -	NA
NA	- Visual Acuity -	NA
NA	- IOP (mm Hg) -	NA



ADVICE:

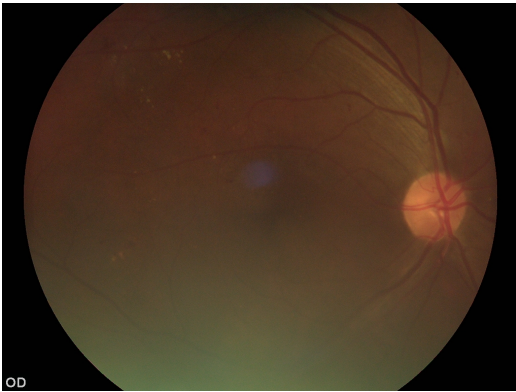
Recommended to have an annual eye examination in 12 months.

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Satish praveen / F / 23 Yrs

1927255909



OD



OS

DR: Signs Not Present

AMD: Signs Not Present

ONH region: Normal

HR: Signs Not Present

OD Clinical Findings:

Examination of the non-mydratic fundus image shows a clear picture of retinal surface, retinal vasculature and optic nerve head region for making clinical observations.

The retinal surface shows normal contour with no deposits or lesions of clinical significance. There are no signs of haemorrhages or exudates.

The retinal vasculature is normal with arterioles & venules of normal contour & calibre.

The ONH region shows normal contoured optic disc and cup with no other lesions of clinical significance.

OD Observation & Comments:

Observations of the retinal surface reveal a normal reading. There are no findings indicative of any

ADVICE:

Recommended to have an annual eye examination in 12 months.



You can access the high resolution images by scanning the following QR code or through the url
<http://bit.ly/36PEnKx>

DR: Signs Not Present

AMD: Signs Not Present

ONH region: Normal

HR: Signs Not Present

OS Clinical Findings:

The non-mydratic fundus image is clear for making clinical observations of the retinal surface, retinal vasculature and optic nerve head region.

The retinal surface appears in normal shape with no deposits, lesions or signs of microaneurysms, haemorrhages and exudates.

The retinal vasculature is normal with no alterations in vessel wall & vessel diameter.

The ONH region shows normal contoured optic disc and cup with no other lesions or optic nerve abnormalities in the retinal image.

OS Observation & Comments:

Observations of the retinal surface reveal a normal reading. There are no findings indicative of any

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changes in the retinal surface.

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Observations of the retinal vasculature reveal no signs of vascular changes associated to elevated blood pressure.

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Observations of the ONH region shows findings which are indicative of normal ONH structures.

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ADVICE:

Recommended to have an annual eye examination in 12 months.



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Advice

Interpretation

Fundus images **may have any or combinations of the clinical findings** which can be related to more than moderate DR, either of the stages of DR as listed below may be present. Hence the person is recommended to visit Ophthalmologist for further examination & diagnosis.

Recommended to have further eye examination by an eye specialist at the earliest.

Clinical Findings

Retinal Condition

- Exudates
- Cotton wool spots
- Dot/Blot hemorrhages
- Intra retinal hemorrhages
- Vitreous /Preretinal hemorrhage
- Microaneurysm(s)
- Intraretinal microvascular abnormalities
- Neovascularization

Diabetic Retinopathy

- Macular edema

Diabetic Macular Edema

- Drusen

Age related Macular Degeneration

- Mild generalized arteriolar narrowing
- Focal arteriolar narrowing
- Arteriovenous nicking

Hypertensive Retinopathy

- Rim loss; I-S-N-T
- RNFL loss; I-S-N-T
- Vertical CDR of ≥ 0.6
- Optic nerve cupping
- Focal notching
- Peri-papillary atrophy
- Optic disc hemorrhage
- Optic disc edema
- Optic disc pallor

ONH abnormality

- Focal/grid laser scars
- Peripheral scatter laser scars
- Tractional retinal detachment
- Fibrovascular changes
- Venous beading
- Venous loop
- Other lesions

Other retinal changes

Recommended to have an annual eye examination (at 12 months) or within a year.

Fundus images does not have any of the clinical findings which can be related to either of the retinal conditions as listed above. Hence the person may undergo screening again after a year or periodically.

Recommended to have further eye examination by an eye specialist at the earliest as fundus image is not clear for making sufficient observations.

Either fundus images are not of good quality or captured images do not show features of retinal fundus. Poor quality of fundus images may occur, either when images are acquired in bright environment, pupil size is small, haziness of media due to cataract, floaters or other pathology. Hence the test is not able to analyze images for Retinal Condition and the person is recommended to visit Ophthalmologist for a detailed eye examination.



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