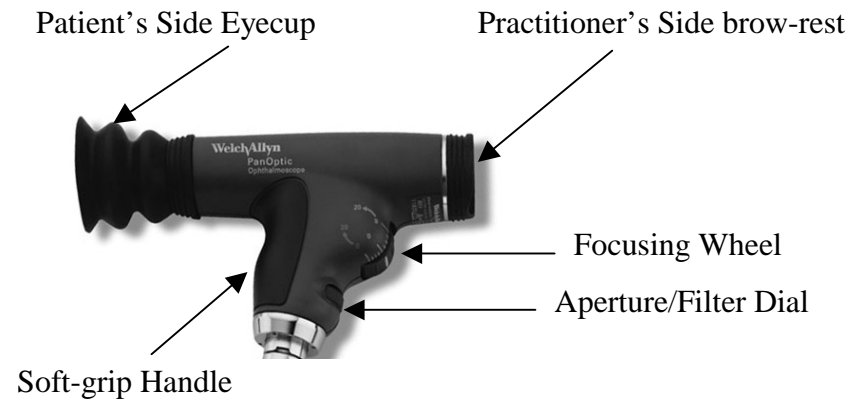


**Quick Reference Guide**

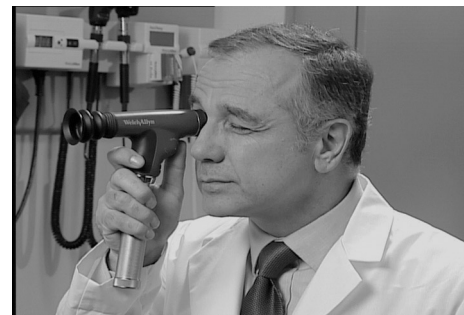
**Instrument Controls**



**Instructions for Conducting an Exam**

**1. FOCUS**

- Start by removing your eyeglasses (recommended).
- Begin by focusing across the room on an **object at least 10 feet away** – the image should be clear and sharp.



**2. SET TO SMALL SPOT**

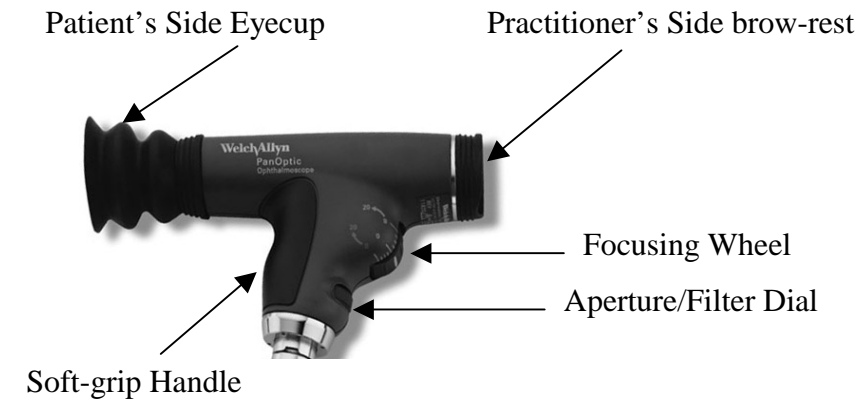
- For optimal undilated viewing, aperture dial should be placed on the **small aperture (green line)** position
- Turn scope on (using any Welch Allyn 3.5v power source). Adjust light intensity rheostat to maximum position.



**Continued on back.**

**Quick Reference Guide**

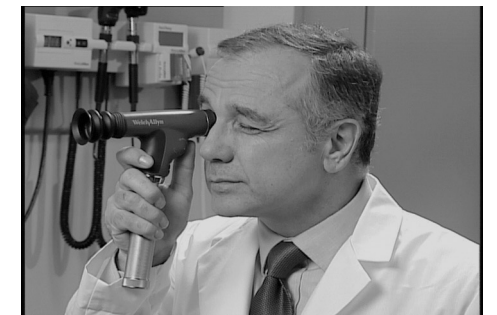
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**Continued on back.**

### 3. EXAM POSITION

- Position yourself about **6 inches away** and at a 15 to 20 degree **angle** on the **temporal side** of your patient
- Looking through the scope, shine the light at the patient's eye and look for the **red retinal reflex**.



### 4. APPROACH & MAKE CONTACT

- Slowly **follow the red reflex** toward the patient and into the pupil.
- The **eyecup should contact** the patient's brow.
- This **contact is essential** because it:
  1. Establishes the proper viewing distance
  2. Provides stabilization for the view
  3. Creates a pivoting point for leverage in panning around the retina
  4. Occludes ambient light



### 5. OPTIMIZE VIEW

- **Adjust the focus (as necessary) to correct for your patient's blur.**
- **Compress the eyecup** about half its length to maximize the view.



### 6. WHAT YOU WILL SEE

- The **entire optic disc and surrounding vessels** should be visible.
- You should be realizing **5X the field-of-view** you normally see with a standard ophthalmoscope in an undilated eye.
- This wide view makes it **much easier to see** important fundus features.



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