Why Routine Eye Exams Are Important
General Eye Care and Emergency Eye Care

Why Are Eye Exams Necessary if There Are No Apparent Vision Problems?

“You have to think of your eyes as a wonderful gift you’ve been given – a gift that should last your entire lifetime. It is vital to take good care of your eyes and have them examined annually. An ophthalmologist can spot potential concerns or conditions that a patient might not yet be aware of, because many problems can’t be detected until some symptoms or damage has occurred. With an annual exam, an ophthalmologist has the chance to recognize various conditions and to either treat or monitor that potential condition before it has a chance to become a real issue.” — Jason Gorscak, M.D., Florida Eye, Refractive Cataract Surgery, Glaucoma & Comprehensive Ophthalmologic Care

Eye care should be a routine annual exam, just like going to the doctor or dentist. A complete eye examination does more than determine how clearly you see from a distance and which lens prescription, if necessary, will give you the best possible vision. At Florida Eye your ophthalmologist will also run a number of tests to check the health and function of your entire eye.

What Type of Testing Is Done During a Complete Eye Exam?

At Florida Eye we are able to offer comprehensive general eye care exams, covering everything from basic vision testing to an exam of the entire eye. The retinas, corneas, irises and lens are all examined, and a complete evaluation is the result. A patient who comes to Florida Eye should expect to provide a complete medical history so the doctor can focus on particular inherited concerns or any other medical conditions that could affect vision.
A Complete Eye Exam Will Include Many Or All Of These Tests:

- **A visual acuity test** measures how well you can see from a distance. Covering one eye at a time, you will look at an eye chart and be asked to identify letters that get smaller as you read farther down the chart.

- If your visual acuity test indicates that you need corrective lenses, you will be given a **refraction test** to determine the correct prescription. Your ophthalmologist may use **retinoscopy** to estimate your prescription by shining a light into your eyes to see the movement of the light reflected by your retina.

- Your ophthalmologist will finalize your prescription by asking you to look through a device called a **phoroptor** that has many different lenses in it. You will be asked to compare a series of two lens choices and evaluate which lens combination provides you with your best possible vision correction.

- To test the function of your **eye muscles**, your ophthalmologist will have you follow the movement of an object in many directions, looking for weak muscles or poor control of the muscles that move your eyes.

- To test your peripheral vision, which is what you are able to see to the sides of your visual field when you look straight ahead, your ophthalmologist uses a **visual field test**. You may be asked to cover one eye at a time and, while looking straight ahead, tell your ophthalmologist when you can see his or her hand or other object as it moves inward from outside your visual field. Or a computer program may be used to test your visual field. If so, you will look straight ahead into a special device, often a lighted bowl-shaped instrument, and press a button each time you see a flash of light. Your ophthalmologist can use your responses to see if there are any blind spots in your visual field.
- Your ophthalmologist will use a **slit-lamp microscope** to examine the front part of your eye, including the cornea, iris, and lens. You will sit at the slit lamp, which greatly magnifies your eye and shines a bright line of light into it, allowing your ophthalmologist to examine your eye closely. Before the test, you may be given eyedrops with fluorescein, an orange dye, to make your cornea easier to see. This dye will wash away naturally.

- To test for glaucoma, a disease that can cause blindness when too much pressure in your eye damages the optic nerve, your ophthalmologist will use a **tonometer** to measure your intraocular pressure.

- Using one method, **noncontact tonometry**, you will sit with your chin and forehead resting comfortably on the guides of a device that will blow a puff of air into your eye and thereby measure your eye pressure.

- **Applanation tonometry** is another option. Your ophthalmologist will give you eyedrops containing an anesthetic and fluorescein dye to numb the front surface of your eye and will then use a manual tonometer to gently touch your cornea and measure the force required to flatten it. This procedure is quick and painless, and the anesthetic will wear off in 15 or 20 minutes.

- Your ophthalmologist may also use **pachymetry** to measure the thickness of your cornea, which helps evaluate the accuracy of your intraocular pressure measurement. After applying numbing eyedrops, your ophthalmologist will use ultrasonic waves to measure your corneal thickness. This test is also a critical component of evaluating a patient’s candidacy for LASIK surgery.

- A **retinal examination** explores the back of your eye including the retina and optic nerve. First, depending on the type of retinal examination your ophthalmologist chooses, your pupils will be dilated with eyedrops, which may sting briefly.
If your ophthalmologist chooses to use **direct examination**, he or she will shine a light in your eye and use a device called an ophthalmoscope to look at the back of your eye.

Alternatively, using a method called **indirect examination**, your ophthalmologist may use a much brighter light mounted on his or her forehead to examine your eye while holding it open.

Finally, to get the best look at the back of the eye, your ophthalmologist may choose to perform a **slit-lamp examination**, which combines the use of the slit lamp and special lenses. Retinal examinations usually take about five minutes, but the eyedrops will continue to blur your vision for several hours. You may not be able to drive and will be sensitive to bright light, but this is temporary and should resolve in several hours.

### Emergency Care

Florida Eye offers emergency medical care and can handle any type of eye injury. Our state of the art treatment rooms and outpatient surgery center in Boynton Beach are equipped with everything necessary to treat a wide variety of emergencies.

### Emergency Situation

Chemical burns are the most common types of eye injuries. Alkaline materials (lye, plaster, cement, and ammonia) can cause severe damage and even blindness. Solvents, acids, and detergents also can be very harmful to the eye.

**FIRST AID STEP**

Eyes should be flushed liberally with water if exposed to any of these agents. If sterile solutions or eye washes are readily available, use them to flush the affected eye. If not, go to the nearest sink, shower, or hose and immediately begin washing the eye with large amounts of water. If the eye has come in contact with an alkaline agent, it is important to flush the eye for at least 10 minutes or more before even considering going to the doctor. Make sure water is getting under the upper and lower eyelids. After at least 10 minutes of flushing, transport the patient to the nearest emergency room.
Emergency Situation

Abrasions or scratches of the eyelids and cornea, the clear covering of the eye, occur frequently and can be quite uncomfortable.

FIRST AID STEP

If the abrasion is dirty, gently cleanse the area with a stream of clean water. Do not attempt to treat severe blunt trauma or penetrating injuries to the eye. Tape a paper or Styrofoam cup over the injured eye to protect it until proper care can be obtained. Try to avoid strenuous activity if such an injury has occurred and seek proper medical care immediately.

First aid is only the first step for emergency treatment. If you experience pain, impaired vision, blurred vision, partial loss of vision, double vision or any possibility of eye damage, call your ophthalmologist or go the emergency room immediately. In the case of a blow to the eye, do not assume the injury is minor. The eye should be examined thoroughly by an ophthalmologist because vision-threatening damage such as an intraocular bleed or a retinal detachment could be hidden.

Why Choose Florida Eye Doctors for Your Routine and Emergency Care?

All of our doctors are skilled in emergency care, and depending on the type of injury sustained, one doctor may be more suited to those particular needs. A simple phone call may be able to provide us with enough information to determine if someone should be seen immediately at Florida Eye, and by which doctor. Between Drs. Barry Schechter, Lee Friedman, Randy Katz and Jason Gorscak, we have every need covered.
Florida Eye Microsurgical Institute offers a full range of total eye care, including routine examinations, pediatric eye care, dry eye, advanced corneal, retinal and cataract procedures, laser treatments, glaucoma, diabetic procedures and various other sophisticated treatments. With its own pediatric wing and fully accredited outpatient surgical center in Boynton Beach, the Institute also has offices in Wellington, Boca Raton and Juno Beach.

Florida Eye enjoys a reputation as the premier center for clinical trials of breakthrough therapies nationwide. At any given time we are conducting studies in a variety of conditions such as Wet and Dry AMD and Diabetic Retinopathy. For information on current or future studies contact Margo Dague, our study coordinator, at (561) 736-5055 or via email at margo@fleyedocs.com. You can also visit our site at fleyedocs.com.

---

**Wellington**

2575 State Road 7  
Wellington, FL 33414  
(561) 792-1205

**Boca Raton**

9980 Central Park Blvd  
Suite 204  
Boca Raton, FL 33428  
(561) 451-4514

**Boynton Beach**

1717 Woolbright Road  
Boynton Beach, FL 33426  
(561) 737-5500

**Juno Beach**

13901 U.S. Hwy 1  
Suite 7  
Juno Beach, FL 33408  
(561) 748-8230  
(Pediatrics Only)

fleyedocs.com  |  Se Habla Español