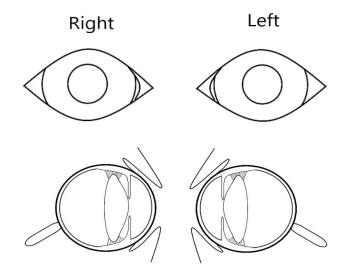
## Pet Eye Care remote assessment exam sheet

Patient details: Name	Age:	Breed:	Sex:	
Client details: Name:	Phone number:.		Email:	
Clinic details: Vet name	: Clinic name:			
Primary complaint:				
Pupillary light reflexes (use swinging light t	est):			
When light is shone into the RIGHT eye the direct (right) PLR is and the indirect (left) PLR				
When light is shone into the LEFT eye the di	irect (left) PLR is	and	the indirect (right)	PLR
Dazzle reflex (use bright white LED light, i.e	. cell phone light)			
RIGHT eye the dazzle reflex is	LEFT eye the	e dazzle reflex	is	
Menace response: (cover the non-assessed	eye)			
RIGHT eye the menace response is	LEFT eye the	e menace resp	onse is	
Tracking response (dogs):				
Under bright lighting conditions the tracking response to a moving cotton wool ball was				
Schirmer tear test (dogs): Right eye	mm/1 min	Lef	t eye mr	m/1min
luorescein testing (irrigate after application): Right eye:		Lef	t eye:	
<b>Photo:</b> Email a full frame well focused photos of the eyes, or upload to the dropbox folder with patient's				

name

Use diagrams below to further describe lesion, if useful



 $\underline{\textit{Checklist:}} \ \textit{Exam sheet emailed} \ \Box$ 

Photos emailed/uploaded  $\Box$ 

Clinical notes emailed  $\Box$