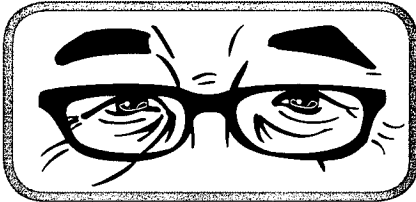


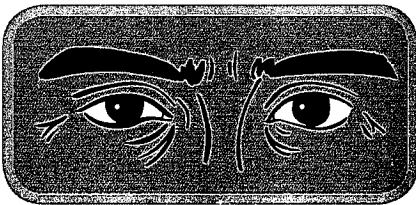
# Tips for Healthy Eyes

**PrimeWest**  
**WHEALTH**



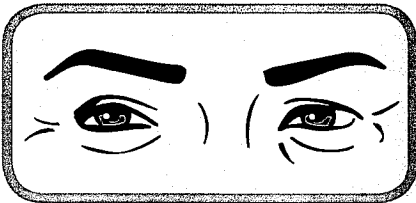
## Get a dilated eye exam every year

- It's covered by many insurance plans.
- It's easy. Your eye doctor will put drops in your eyes and all you have to do is look into a machine.
- Your eye doctor will also take photos of the back of your eyes to compare the health of your eyes from year to year.
- Be sure to have your eye doctor send your exam results to your primary care doctor.



## Know how diabetes can affect your eyes

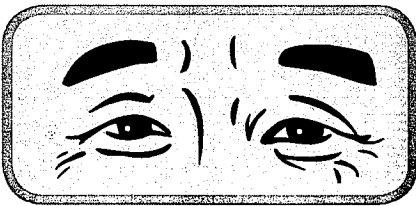
- Diabetes can cause damage to blood vessels in the eye (diabetic retinopathy).
- Diabetes can cause clouded vision (cataracts).
- Diabetes can be associated with glaucoma, which can involve increased pressure in the eye.



## Know the symptoms

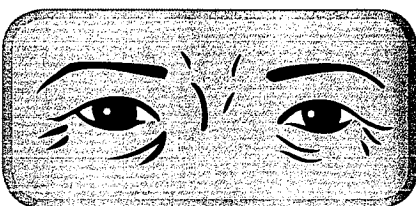
Contact your eye doctor if you have any of the following:

- Vision changes
- Floating spots
- Blurred vision
- Double vision



## Take control

- Work with your doctor to keep your blood sugar, cholesterol, and blood pressure under control.
- Stop smoking.



## Be aware

- See your eye doctor yearly, even if your vision is fine.
- Watch for signs and symptoms of vision change. Discuss these changes with your doctor immediately.



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Tips for Healthy Eyes Fax Form  
G6-FK5.5  
20952493(1)-11/09-SGR-English  
19817045-1

# Diabetes

Please fill out and fax back to  
primary care physician

## Eye Exam Fax-Back Form

(To be filled out by doctor)

Eye Specialist (Write in or apply office stamp)

Date examined:     /     /

Primary Care Doctor (Write in or apply office stamp)

Fax # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date examined:     /     /

### Patient Information

Patient name: \_\_\_\_\_ DOB:     /     /

Diabetes mellitus:  Type 1    Type 2   A1C: \_\_\_\_\_   BP:     /       LDL-C: \_\_\_\_\_

Duration of diabetes (in years): \_\_\_\_\_   Current diabetes therapy:  Insulin    Oral    No Medications

Complaints of decreased vision or floating spots:  Yes    No

### Exam Findings

Visual acuity (best corrected):     OD: \_\_\_\_\_     OS: \_\_\_\_\_

Intraocular pressure:     OD: \_\_\_\_\_     OS: \_\_\_\_\_

within normal limits      within normal limits

> normal      > normal

Tonometric method: \_\_\_\_\_

Time of measurement: \_\_\_\_\_

Additional Ocular Findings/Treatment

### Dilated Fundus Exam Performed

#### Diagnosis

No diabetic retinopathy	<input type="checkbox"/> OD	<input type="checkbox"/> OS
Nonproliferative diabetic retinopathy	<input type="checkbox"/> OD	<input type="checkbox"/> OS
Mild	<input type="checkbox"/> OD	<input type="checkbox"/> OS
Moderate	<input type="checkbox"/> OD	<input type="checkbox"/> OS
Severe	<input type="checkbox"/> OD	<input type="checkbox"/> OS
Proliferative diabetic retinopathy	<input type="checkbox"/> OD	<input type="checkbox"/> OS
Clinically significant diabetic macular edema	<input type="checkbox"/> OD	<input type="checkbox"/> OS

### Treatment Plan

Monitor only

Additional testing/treatment recommended: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_