

**On behalf of Vision Expo, we sincerely thank you for being with us this year.**

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**Financial Disclosure Statement**

**Andrew Bruce provides consulting services for . . .**

- VSP Optics/UUniversity
  - Mitsui Chemicals
  - Optical Training Institute
- All relevant relationships have been mitigated
  - He has NO financial interest in any product presented in this course.

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**THESE DON'T WORK!**  
ABO LEVEL II - 1 HOUR

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## Learning Objectives

*Upon completion of this course, the participant should be able to . . .*

- Appreciate the benefits of establishing an in-office protocol for handling patient eyewear concerns
- Utilize the SOAP method for problem-solving patient eyewear concerns
- Communicate the factors that often influence patient eyewear concerns.

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## Where To Begin?

Common Vision Complaints

- "I just picked these up and I can see better with my old glasses"
- "I picked these up a couple of days ago & I feel like my right eye is pulling to the side"
- "My sunglasses are not as clear as my regular pair!"
- "I can't see!"
- "I can't see to drive with my reading glasses!"

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## Establishing A Protocol For Handling Patient Eyewear Concerns

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### Dealing With The Irate Patient



- Don't take it personally
- Comply with your company policies
- Listen and show you care
- APOLOGIZE and thank them for the opportunity to make things right
- Diffuse the situation.

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### Problem Solving and Troubleshooting

- Refer to patient's chart notes
- Ask questions...
  - What are their symptoms?
  - What is not meeting their expectations?
  - When did they first notice the issue(s)?



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### Problem Solving Skills

- **Understand the patients' frustrations**
  - Listen closely
  - Provide reassurance
  - Empathize and relate
- **Ensure the patient feels "heard"**
  - Provide your full attention.



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### Troubleshooting is an Art



- Opportunity to learn and expand your skillset
- Your words/reactions will influence the outcome
- Masters at troubleshooting reflect highly on your practice.

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### The SOAP Method



- S:** Subjective
- O:** Objective
- A:** Assessment
- P:** Plan.

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### S: Subjective



- Based on the patient's perspective
- Chief complaints
- Ask open-ended questions
- Focus on the "what, where, when, how, and why?"

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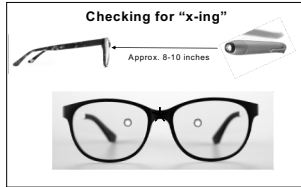
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### O: Objective

- Based on your perspective as an eye care professional
- Determine patient's BCVA
- Re-verify eyewear powers, fitting, adjustment, measurements
- If possible, verify previous pair.



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### A: Assessment

- Interpretation of both subjective and objective data
- Determine cause of patient's concerns
- Opportunity to demonstrate your expertise.



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### P: Plan

- Based on assessment, devise a plan of attack
- Rectify issues within your scope of practice
- For Rx issues, discuss findings with the doctor
- Discuss plan with the patient.



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## Influential Factors

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## Influence of Medical Issues

### BCVA and Related Eye Health Issues

- Macular degeneration
- Cataracts
- Corneal irregularities
- Dry eye syndrome
- Amblyopia
- Diabetes.



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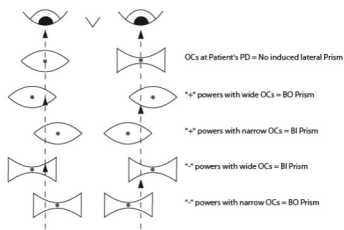
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## Influence of Misaligned Optical Centers



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### Influence of Dissimilar Base Curves

- **Example Rx:** OD +3.00 -0.50 x 090  
OS +3.00 DS
- **Complaint:** Patient is experiencing depth perception issues and complains that one lens is significantly thicker than the other
- **Verification:** Rx and PDs verify as ordered  
BC measure: OD +4.00D OS +8.00D
- **What's going on, and why?**

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### Influence of Multifocal Fitting Height

- Example:**
- Previous FT bifocal wearer now needs a trifocal
  - Patient has been used to a low fitting seg in a frame with a deep "B"
  - Patient insists on seg being kept low otherwise it's too distracting
- Complaint:** Mid-range is much better but must raise glasses to read
- Why?
  - How could this have been avoided?

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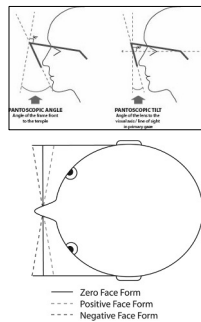
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### Influence of Frame Fitting

- How can frame fitting angles affect eyewear performance?
- Changes in pantoscopic tilt, face form, and vertex distance.




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## Putting SOAP To Work

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### Patient Example

<b>Previous Rx:</b> OTC +1.50 Readers
<b>Original Rx</b> OD: +0.50 -0.50 x 037 OS: +1.25 -0.50 x 137 ADD: +1.75
<b>New SV Near Rx</b> OD: +2.75 -0.50 x 037 OS: +3.50 -0.50 x 137

**S:** 50-year-old female  
Distance and near problems with first PALs  
Previous: OTC +1.50 readers

**O:** Worn for 15 days  
PDs and seg heights verify as ordered  
Lens powers verify with only minor differences  
Complex ocular history (see assessment)

**A:** Amblyopia possible cause of PAL problems  
Minor discrepancies in verified powers  
Loose-lens O/R calls for extra "plus" at near  
Patient elects to have SV near, only  
Trial framed SV near with added plus

**P:** Discuss findings with doctor  
Dr okayed re-making as SV near with new powers

**RESULT:** Patient very happy with near vision  
Satisfied with uncorrected distance

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### Additional Common Patient Concerns

- Fishbowl effect / swim
- Head positioning
- Depth perception.



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## Wrapping Things Up With Wrap Eyewear

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### Working With Wrap Eyewear

- Notorious for causing visual discomfort - "swim" sensation
- For best vision, especially with wrap eyewear, default to a compensated lens design
- Apply compensation to PDs.



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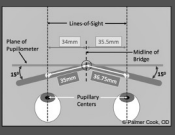
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### PD Modification For Wrap Eyewear

$$PD_{new} = PD_{old} / \cos \alpha$$

Where  $\alpha$  = wrap angle



- With wrap eyewear, lenses require different centering
- Optician's responsibility
- **Example:** mono PDs: 34 / 35.5 wrap 15°
- $PD_{new}$  for OD = 34mm /  $\cos 15^\circ = 35.2\text{mm}$
- $PD_{new}$  for OS = 35.5mm /  $\cos 15^\circ = 36.75\text{mm}$

Wrap	PD Modification
Up to 6°	None
16°	Add 1mm OU
26°	Add 2mm OU

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## Key Takeaways . . .

- Establishing a protocol for handling patient eyewear concerns is vital
- The SOAP method helps streamline the problem-solving process
- There are many influential factors to consider when problem-solving
- An optician, skilled at problem-solving, can often resolve patient concerns, minimizing Rx checks with the doctor– everyone benefits!

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## Q & A

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**Thank You!**

**Andrew S. Bruce, LDO, ABOM, NCLEM, FCLSA**

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