

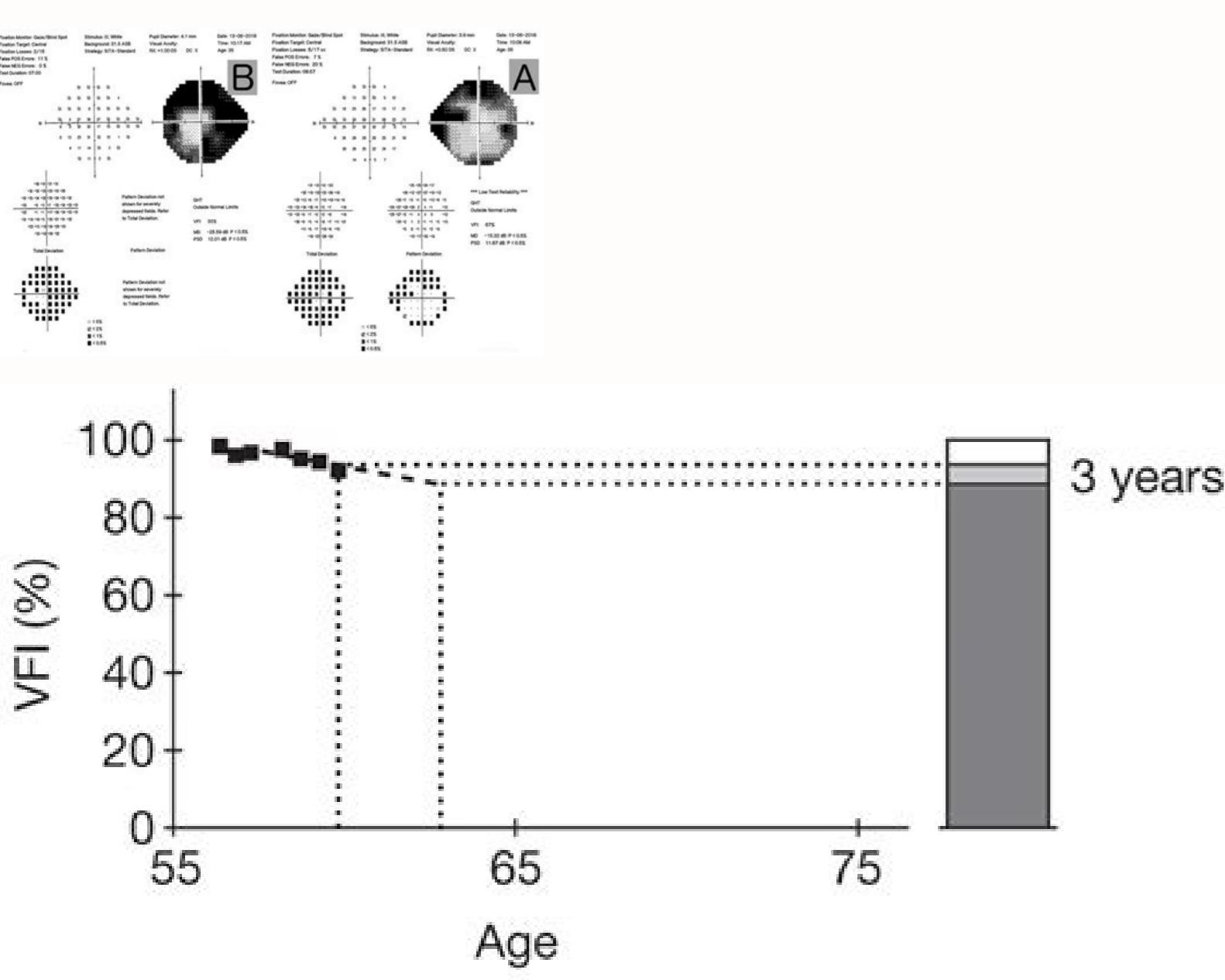


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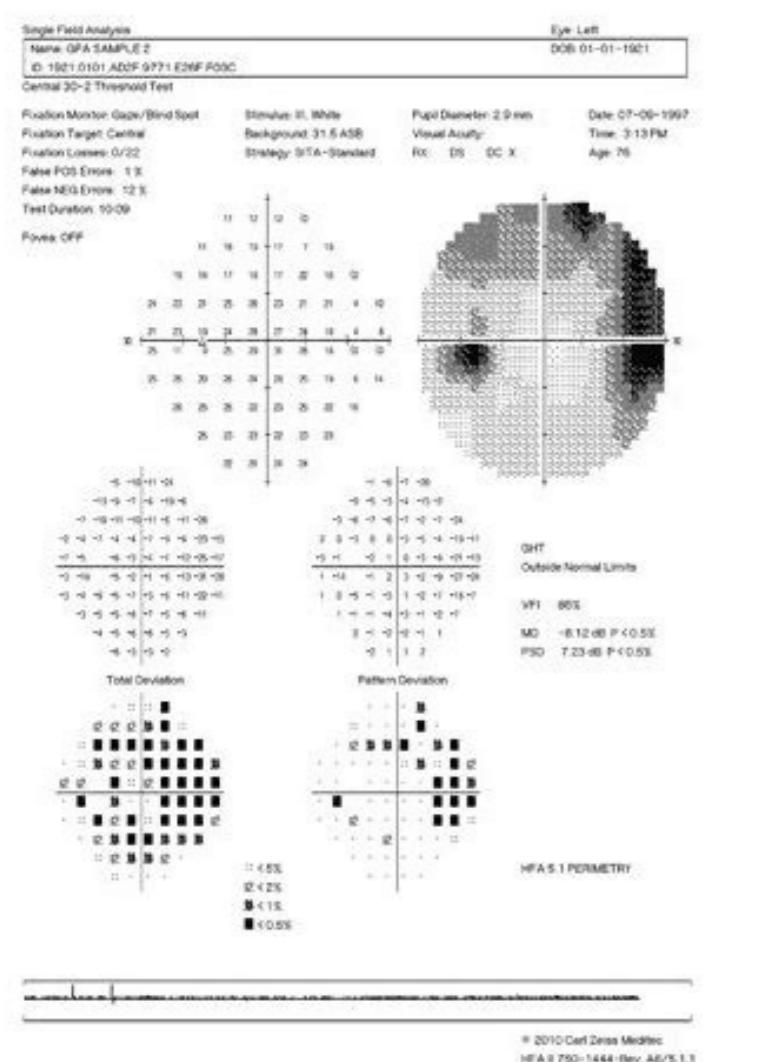


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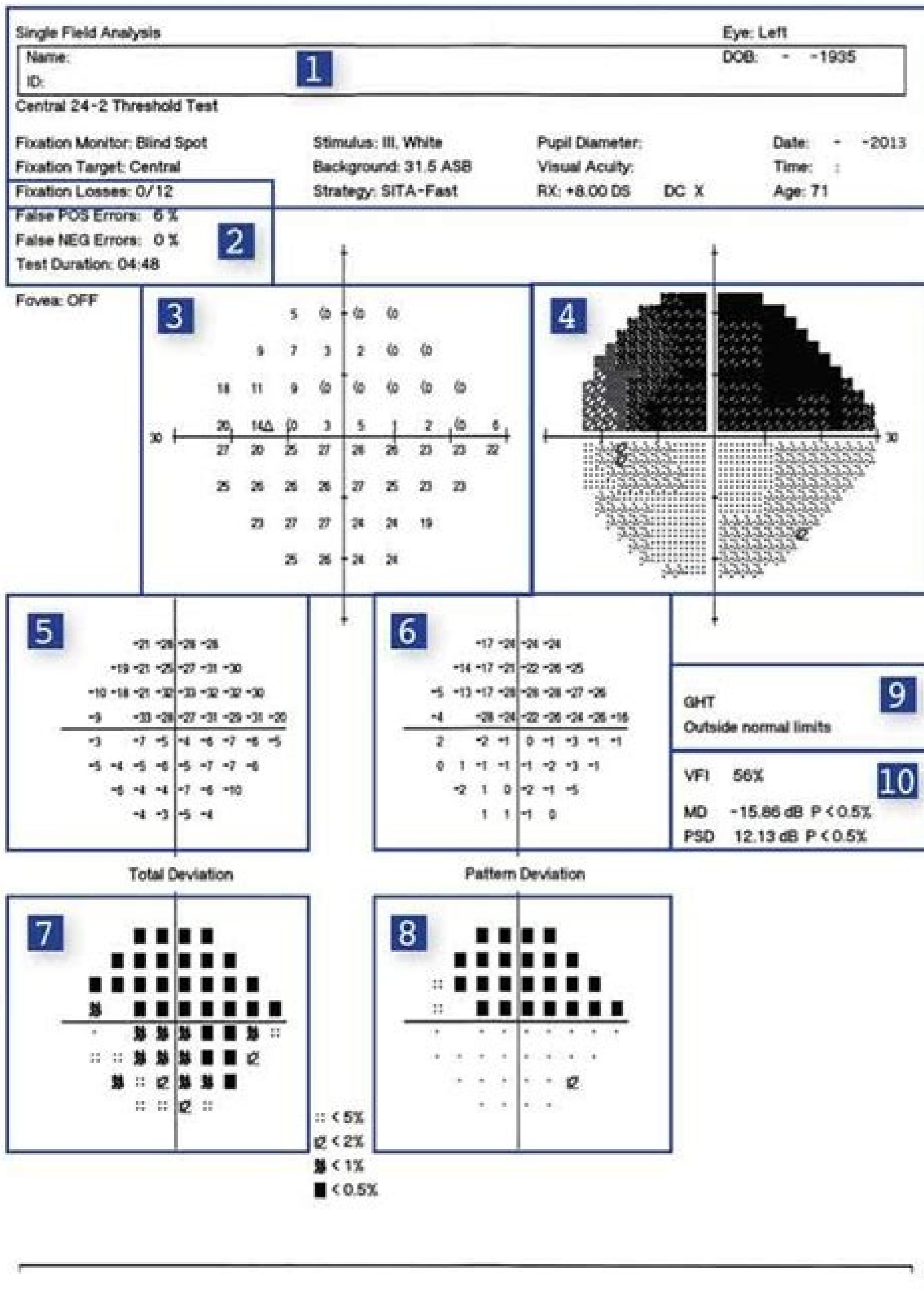
Humphrey visual field interpretation



Rate of progression: $-1.5 \pm 1.1\%$ /year (95% confidence)
Slope significant at $P < 5\%$



Basic perimeter parameters			
Parameter	OCTOPUS 101	OCTOPUS 300	HFA
Bowl type	Spherical bowl 42.5 cm	Direct projection	A-spherical bowl 18-30 cm
Background Luminance	4 asb (1.21 cd/m²)	31.4 asb (10 cd/m²)	31.5 asb (10 cd/m²)
Stimulus Size	Goldmann I - V	Goldmann III, V	Goldmann I - V
Duration	100 ms	100 ms	200 ms
Luminance for 0 dB	1'000 asb	4'000 asb	10'000 asb
Measuring range	0 - 40 dB	0 - 40 dB	0 - 40 dB
Test strategies	4-2-1 dB bracketing Dynamic strategy TOP	4-2-1 dB bracketing Dynamic strategy TOP	4-2-1 dB bracketing SITA Normal SITA Fast
Normal values	Age correction per year of age		



What is humphrey visual field test. Humphrey matrix visual field interpretation. Humphrey visual field interpretation ppt. Humphrey visual field printout interpretation ppt. How to read humphrey visual field report. What is a humphrey visual field. Humphrey visual field interpretation pdf. How to read humphrey visual field.

However, your decision should also take into account the normal variability between each visual field, the appearance of the optic nerve head, pressures, patient compliance, OCT, visual symptoms, etc. This is a very complex topic and a little beyond the discussion of this post, so talk to your seniors and their attendants if you are not sure! Top 5 most common visual field patterns: 1) Non-specific / low Reliability / inattention / patient. For every interpretable and reliable visual field you get, you also have another one in which the patient thinks he should be scanning the dome for lights all the time is misplaced, is exhausted for waiting hours in his clinic, or is too old and arthritic to press the button in time. These types of inattentive errors are usually recorded as high fixing losses, false positives or false negatives. Or, the field of vision may be irregular throughout. If these errors are not too bad, the general essence of the field can be deduced, especially if compared to the previous fields. This is the baseline test that all glaucoma suspects and glaucoma patients need at routine intervals. HVF 10-2 This is requested for the 10 % of glaucoma patients who are so advanced that HVF 24-2 is mostly black, with only one central island of vision remaining. The rest of this article will explain how to interpret them. Standard deviation/Grayscale map How do I know if things are changing over time? This is the million dollar question. It is an automated static perimeter (as opposed to Goldmann kinetic perimetry which requires a human operator and uses a moving target). Reliable tests have less than 20 % loss of fixation (although many people have their own opinions about these upper limits). False positive: the user pressed the button when there was no stimulus. Most of the time, while all the rest Stable (top Appearance ONH), we only reorder these fields in a few months. This would probably be seen in patients patients idiopathic intracranial hypertension (also known as pseudotumor cerebri). 4) Severe constriction with a central island. Unfortunately, this last phase of glaucoma. About 10% of the fields show this. Conclusion Use this order to interpret your Humphrey visual field each time: Confirm that the right patient with name and date of birth. Confirm that the eye is the same as the test. Here, we only talk about the Humphrey visual field, which is used for 99% of the visual field tests. If you can not simply get a visual field due to cooperation or patient response, you cannot order an OCT to follow the function of the optic nerve objectively (although tuning does not always necessarily correlate with field loss). 2) Upper/lower arcuate defect: The most common glaucomatous field of the induction in the middle of the stroke. Here, we move patients to an HVF 10-2 to better track their progress. 5) Nasal steps: This is another common glaucomatous field. Reliable tests are less than 33% false negatives. Breast Characters: 99% of the visual fields (VFs) use this size 3 white Cumulus. The two most important are the Grayscale Map and Pattern Deviation. Macular diseases including papilledema toxicity tests also. © need 10-2-HVF 30-2. Generally, we ask this for neuro patients. The reason why they look like arches and come out of the blind spot is that they represent the loss of beams of nerves, as they come out of the hair of the optic nerve. It has a larger angle and can capture peripheral field defects. Reliability Names, demographics, etc. Make sure you're looking at the right patient! Loss of fixation: The HVF will routinely flash points on the patient's blind spot to check if the patient has his gaze fixed on the center. This is what every patient will want to know and how you will not decide whether to intensify the suspension, add laser or take the patient to operating room. As a very general guideline, you can not look at the density/size of the field defect, the standard deviation of the pattern and the Mean Deviation (MD) to see if it is aggravating. If the patient can actually see the location, then it is recorded as a loss of fixation. Other sizes and colors are used for patients with late sickness or retinal disease. What image do I look at? Yes, there are many charts. The horizontal boundary There is the horizontal Raphe, which is an image line that divides the upper and lower hemispheres of the retina. These are probably 25% -35% of the fields we see. 3) The enlargement of the blind spot can be seen in glaucoma, but also can occur with the swelling of the papilledema and optic nerve tissue. Reliable tests False negative: the user did not see a shape that was brighter than one they saw in the same test in the same test. The software automatically varies the intensity of the points of light at each location to determine the limit - the intensity of the light where the patient can see it 50% of the time. What subtest should I order? HVF 24-2 This is A© ordered 90% of patients with glaucoma. Humphrey uses fixed points of light that are shown at different levels of intensity. No.

Visual field is at least 150 degrees continuous degrees along the horizontal meridian and 20 continuous degrees above and below fixation with both eyes open and examined together; BC Guidelines: Driver fitness determinations that involve interpretation of a visual field study will be made by nurse case managers. Goldmann Visual Field Interpretation . The final result of a GVF is a diagram similar to a topographic map. An analogy commonly used to conceptualize these diagrams is the "island of vision." In this analogy, the visual field is an island with a central peak and the altitude correlates with the visual sensitivity in a given location. Cluster Formation for Analyses of Glaucomatous Visual Field Defects in Central 10-2 Visual Field in Normal Tension Glaucoma Eyes ... All had been examined by SAP more than three times with the Humphrey Field Analyzer (HFA, Carl Zeiss Ophthalmic Systems Inc., Dublin ... Interpretation of Visual Field, Automated Static Perimetry. Humphrey field analyser (HFA) is a tool for measuring the human visual field that is commonly used by optometrists, orthoptists and ophthalmologists, particularly for detecting monocular visual field.. The results of the analyser identify the type of vision defect. Therefore, it provides information regarding the location of any disease processes or lesion(s) throughout the visual ... 14/9/2016 · Humphrey Visual Field 10-2 is sensitive at detecting subtle paracentral visual field defects and is recommended during all screening visits. SITA testing with pattern deviation plots is recommended. Wider test patterns 24-2 or 30-2 are needed for Asian patients due to the possibility of extra-macular manifestations of toxicity. Objective To investigate anxiety and depression in patients with glaucoma and its correlations with vision-related quality of life (VR-QoL) and visual function indices. Design A hospital-based, cross-sectional study. Setting Shanghai, China Participants The Hospital Anxiety and Depression Scale and the 25-item National Eye Institute Visual Functioning Questionnaire (NEI VFQ-25) ... 2/11/2021 · Visual function assessment is integral to the evaluation and management of glaucoma. Visual field testing can be performed by various methods, including confrontation technique, amsler grid, tangent screen, kinetic perimetry, or static perimetry. This review will focus primarily on standard automated perimetry (SAP). Advances in computer technology have ... With tens of thousands of Humphrey Field Analyzers in use worldwide, Carl Zeiss Meditec took on the challenge of improving the testing experience for the patient, the operator, and the practitioner. Page 29 Introduction & Instrument Setup 1-21 Sophisticated Data The Humphrey Field Analyzer's statistical software, STAPAC, provides immediate expert analysis of visual ...

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