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III. ADDENDUM
CRITERIA

→ 1) Loss of vision, congenital
→ 2) Loss of vision, traumatic, resolved > 6 mos.
→ 3) Amblyopia
→ 4) Surgically corrected strabismus
→ 5) Insignificant strabismus (no loss of vision)

ACTION

CLEAR
CLEAR WITH RESTRICTIONS
DEFER
MNQ

RESTRICTIONS/DEFER

UNTIL:

Causes diagnosed and treated. (see ALGORITHM for cause)

RATIONALE

Amblyopia can be caused by ETOH abuse, malnutrition, lead, methanol, chloramphenicol, digitalis, ethambutol or other chemicals.

MEDICAL INFORMATION NEEDED:

Generic information

Ophthalmology

OPHTH-1

5/4/93
**CONJUNCTIVITIS (373.8)**

**CRITERIA**

- Acute Resolved
- Recurrent or Chronic within 2 years

**ACTION**

- CLEAR
- CLEAR WITH RESTRICTIONS
- UNTIL: Treated and resolved

**RESTRICTIONS/DEFER**

- Ophthalmology country
- N/A

**RATIONALE**

Chronic conjunctivitis can return at anytime, usually with less severe symptoms. Is not a threat to sight.

**MEDICAL INFORMATION NEEDED:**

- Generic information and Ophthalmologist evaluation.

**Ophthalmology**

OPHTH-2

5/4/93
CATARACT (366.9), CATARACT REPAIR (13.71), LENS IMPLANT (13.70)

CRITERIA

M. 

ACTION

RESTRICTIONS/DEFER

RATIONAL

MEDICAL INFORMATION NEEDED:

Generic Information;
Ophthalmologist evaluation

7/12/93
CHALAZION (373.2)

CRITERIA
- Resolved, surgically or spontaneously
- N/A
- Current
- N/A

ACTION
- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER
- MNQ

RESTRICTIONS/DEFER
- Resolved medically or surgically

RATIONALE
Benign condition, seldom with any complications or recurrences

MEDICAL INFORMATION NEEDED:
- Generic information

OPHTHALMOLOGY
5/4/93

OPHTH-4
**CORNEAL DISEASE**  
(Keratitis (370.9), Abrasions (918.1), Ulcers (370.0), Transplants (11.6), Other or Unspecified (371.9))

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>ACTION</th>
<th>RESTRICTIONS/DEFER</th>
<th>RATIONALE</th>
<th>MEDICAL INFORMATION NEEDED:</th>
</tr>
</thead>
<tbody>
<tr>
<td>→ 1) Superficial punctate keratitis (resolved)</td>
<td>CLEAR</td>
<td>Ophthalmologist Country for F/U.</td>
<td>1) Complete healing usual; rarely any vision impairment</td>
<td>Ophthalmologist evaluation unless simple abrasion, punctate keratitis, or healed ulcer &gt; 1 yr.</td>
</tr>
<tr>
<td>→ 2) Corneal abrasion (healed)</td>
<td>CLEAR WITH RESTRICTIONS</td>
<td></td>
<td>2) Usually heals rapidly with proper care.</td>
<td></td>
</tr>
<tr>
<td>→ 3) Corneal ulcer, resolved. Ophthalmology evaluation is vision 20/40 or better.</td>
<td>DEFER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>UNTIL:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>→ 1) Corneal ulcer chronic</td>
<td>→ 1) Resolved &gt; 1 yr.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>→ Corneal transplant &gt; 1 yr. vision stable treatment completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>→ 2) Corneal transplant &lt; 1 yr.</td>
<td>→ 2) Defer until &gt; 1 yr. post transplant</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td></td>
<td></td>
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</tbody>
</table>

5/21/93
CRITERIA

1) Enucleation for trauma > 1 mo. post vision 20/40 in remaining eye. (no implant desired)
2) 1 mo. post second implant
3) Malignant cause > 5 yr. post treatment

ACTION

CLEAR

CLEAR WITH RESTRICTIONS

DEFER

UNTIL:
1) Per. > 1 mo. post, MD states stable, meets clear criteria
2) 1 mo. post secondary implant procedure, MD cleared
3) 5 yrs. post treatment and CA free

RATIONALE

Peace Corps policy: corrected vision in one eye must be 20/40

Restrictions/Deferral

N/A

N/A

N/A

MEDICAL INFORMATION NEEDED:

Generic information and Ophthalmologist report,
Need for implant replacement in next 2 - 3 years.

5/4/93
GLAUCOMA, INTRAOCULAR HY: TENSION (365.04) Open-Angle (365.10)
Cortico-Steroid Induced (365.3), Congestive (Narrow Angle) (365.20)

CRITERIA

<table>
<thead>
<tr>
<th>ACTION</th>
<th>CLEAR</th>
<th>CLEAR WITH RESTRICTIONS</th>
<th>DEFER</th>
<th>MNQ</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESTRICTIONS/DEFER</td>
<td>1 &amp; 3) Ophthalmologist for F/U</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| RATIONALE | Intracocular hypertension is increased pressure within the eye WITHOUT damage to the eye. Glaucoma is increased pressure with concurrent damage to the eye. Intracocular hypertension can remain stable and not progress or it can progress and damage the eye, becoming Glaucoma.

MEDICAL INFORMATION

NEEDED: Glaucoma requires individual evaluation by Ophthalmologist.

EVALUATION PARAMETERS

<table>
<thead>
<tr>
<th>Test Procedure</th>
<th>Intraocular Press. mm/Hg</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tonometry Vision Test</td>
<td>&lt; 22</td>
<td>WNL</td>
</tr>
<tr>
<td>Charting of Visual Fields*</td>
<td>22 - 30</td>
<td>Slightly Elevated</td>
</tr>
<tr>
<td>Intraocular Pressure</td>
<td>30 - 45</td>
<td>Elevated</td>
</tr>
</tbody>
</table>

* if diagnosed with glaucoma
CRITERIA: Floaters/flashers diagnosed as no significance

ACTION: CLEAR

RESTRICTIONS/DEFER: CLEAR WITH RESTRICTIONS

RATIONALE: Floaters/flashers are common symptoms that increase with age. The cause should be identified. Both can be insignificant or a symptom of Retinal Disease.

MEDICAL INFORMATION NEEDED: Generic information and Ophthalmologist evaluation to R/O Retinal Disease.

UNTIL:
1) Until 6 mos. post detachment with ophthalmologist evaluation.
2) R/O Retinal Disease

See OPTH 14 (Ret. detachment)
HERPES KERATITIS (054.43)

CRITERIA

N/A → Past, inactive for 2 years → 1) Current, initial episodes

2) 1 or 2 episodes < 2 yrs post

3 or more episodes

ACTION

CLEAR

CLEAR WITH RESTRICTIONS

DEFER

UNTIL:

1 & 2) two years post last episode without recurrence.

RESTRICTIONS/DEFER

Ophthalmology Country.

RATIONAL

Initial infection is sometimes self-limiting, more frequently recurs, sometimes with ulcerations & permanent scarring of the cornea. Herpes Keratitis is one of the leading causes of adult-acquired blindness.

Likelihood for frequent recurrences.

MEDICAL INFORMATION NEEDED:

Generic Information and Ophthalmologist report if within 10 years.

Ophthalmology OPHTH-9

5/4/93
HORDEOLUM (STY) (373.11)

CRITERIA
- Resolved
- N/A
- Active
- N/A

ACTION
- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER UNTIL: Resolved
- MNQ

RATIONALE
Relatively benign condition.
No consequences

MEDICAL INFORMATION NEEDED:
Generic information
Papilledema Resolved for > 6 mos. (cause identified & resolved, see cause)

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RATIONALE
MEDICAL
INFORMATION
NEEDED:

Optic Neuritis can resolve easily in a few days. Or, it can be associated with serious diseases, i.e. multiple sclerosis, tumors, temporal arteritis.

Optic Neuritis is a sign and has an underlying pathology which must be identified and treated.

Treatment not available in PCMU's

Disease is individual and variable, requires individual evaluation and clearance by Ophthalmologist.

5/4/93
**Criteria**
- **1)** Retinal Detachment, Traumatic, > 6 mos. resolved
- **2)** History of Lattice Degeneration with no risk factors.

**Action**
- CLEAR

**Restrictions/ defer**
- **1-2)** Ophthalmology, non-malarial country
- **3)** Ophthalmologist country

**Rationale**
- Chloroquine contraindicated, has potential to exacerbate retinal disease.
- Retinitis pigmentosa - a hereditary degeneration of the retina, results in poor night and peripheral vision.

**Medical Information Needed:**
- Generic information; Individual Ophthalmology evaluation required.
- B.C. Ophthalmologist states disease stable, not likely to progress.

**Risk Factors for Retinal Detachment**
1. History of Retinal detachment, either eye
2. Retinal breaks.
3. Is highly myopic
4. Family history of retinal detachment.

**5/4/93**
UVEITIS (364.0)/IRITIS (364.0)/IRIDOCYCLITIS (364.0)

CRITERIA
- Acute, single episode > 1 yr. ago. No assoc. systemic disease, vision at least 20/40.
- N/A
- Acute, < 1 yr. post episode

ACTION
- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER
- MNQ

RESTRICTIONS/DEFER
- 1) Chronic
- 2) Assoc. with any systemic disease (see below)

RATIONALE
- 99% of cases are acute, single episodes that resolve without sequelae.
- Although rare, it is sometimes assoc. with AIDS, Ankylosing Spondylitis, Reiter's Syndrome, Juvenile Rheumatoid Arthritis, toxoplasmosis, CMV, Histoplasmosis, Toxocariasis, Sarcoidosis (see particular diagnosis). Condition can lead to blindness.
- When assoc. with systemic disease, high risk for recurrence exists.

MEDICAL INFORMATION NEEDED:
- Generic information;
- Ophthalmology evaluation required
- Any associated systemic diseases identified

Ophthalmology

OPHTH-15