

# MEDICAL-IN-CONFIDENCE (After first entry)

Department of Defence

PM 086  
Revised Aug 2004

## Eye Examination - Aviation

• Use only black pen and/or stamps

Health facility or Defence Force Recruiting Centre
Service
Unit, ship or section
Corps, category or mustering

PFID number (Recruiting use only)	
Employee ID	Rank
Family name	
Given name(s)	
Date of birth	Gender

Encl/Folio
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To be completed by applicant

Do you have any past history of eye surgery or disease? List any treatment(s), if required.

### Visual acuity

Distance vision	Right	Left
Corrected		
Uncorrected		
Near vision (Corrected)	Right	Left
N5 at 30-50cm		
N14 at 100cm		

**Refractive limits with effective cycloplegia** (Cyclopentolate HCL 1% is to be used.  
Note: cycloplegia is not required for routine refraction for serving aircrew)

	Right	Left
Hypermetropia		
Hypermetropic astigmatism		
Myopia		
Myopic astigmatism		

### Heterophoria

	Right	Left
Exophoria		
Esophoria		
Hyperphoria		
Hypophoria		
Convergence (cm)		

### Accommodation

Age	cm
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### General physical examination

	Normal or abnormal	Comments
Fields of vision		
Diseases of the eyelid		
Fundus examination		
External and anterior segment		
	Right	Left
Intraocular pressure (mmHg)		

History of refractive surgery (Attach additional reports, if applicable)

### Second appointment (Required if contact lenses worn)

	Right	Left
Visual acuity wearing lenses		
Spectacle blur		

Additional comments

Recommended AVR

AVR 1  AVR 2  AVR 3  AVR 4

Signature	Printed name	Date
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