

# MYOPIA MOMENT

PATIENT FOLLOW-UP

This Myopia Moment gives you a brief overview of how often and what to check during a patient follow-up appointment. This document outlines best practices, however, please consider each family's understanding, interest, willingness to follow treatment regimen, financial status, and time availability. Please refer to the source references for more details

## FOLLOW UP FREQUENCY & WHAT TO CHECK

The frequency of follow-ups will vary depending on treatment. You will also want to complete the following during each appointment, though specific treatments will require additional examinations:

### At each follow-up:

- Check case history
- Any issues related to treatment
- Corrected far visual acuity
- Over-refraction

### At 6-month follow-up:

- Cycloplegic refraction (if available)
- Axial length measurement

### At 1 year follow-up:

- Complete exam including eye health and fundus check



### SOFT CONTACT LENSES

#### FREQUENCY OF FOLLOW-UP:

1 week » 1 month » 6 months » 1 year

Thorough slit lamp exam of the anterior segment at each appointment



### ORTHOKERATOLOGY

#### FREQUENCY OF FOLLOW-UP:

1 day » 1 week » 1 month » 3 months » 6 months » 1 year

Corneal tomography or topography, if available, at each appointment



### SPECTACLE LENSES FOR MYOPIA CONTROL

#### FREQUENCY OF FOLLOW-UP:

1 month » 6 months » 1 year



### ATROPINE

#### FREQUENCY OF FOLLOW-UP:

1 day » 1 week » 1 month » 3 months » 6 months » 1 year

Check pupil size, intraocular pressure and sensitivity to bright light at each appointment

### If myopia continues to progress, consider the following:

- Was the refraction accurate? Was the patient cyclopleged?
- Are parents and the child following treatment instructions?
- If not following treatment instructions, consider whether current control modality is best suited to lifestyle and needs.

### If myopia stabilizes, continue to follow up every 6 months.

Ideally, spectacles and contact lens wear should continue until end of childhood (18 years)\*, and possibly into adulthood, to avoid any progression.

While there are no established guidelines for when to cease using Atropine, eye care practitioners should consider alternative treatments after two years of Atropine use.