MICHIGAN COLLEGE OF OPTOMETRY CONTACT LENS INSTRUCTIONAL GUIDE FOR UNIVERSITY CLINIC PATIENTS

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ABSTRACT

Background: This paper addresses the importance of instructional guides for contact lens wearers. The purpose emphasizes preparing a guide to be used at the University Eye Center at The Michigan College of Optometry. The document created will aid optometrists and optometry students in communicating with their patients effectively in contact lens care. Methods: Research information was collected by utilizing optometry magazines and optometric textbooks. Results: Information was analyzed and prioritized into list format for patient education and success in contact lens wear. Conclusions: The importance of effective patient communication cannot be overemphasized. Information reviewed concluded complications occur with improper contact lens care. Providing written instructions to patients allows for effective communication in office and for the patient at home.
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DISCUSSION

There were approximately thirty-six million contact lens wearers in the United States in 2005. Of the thirty-six million contact lens wearers, three million were newly fit patients. It is estimated that contact lens wearers comprise twenty to thirty-five percent of a typical optometric practice. Contact lenses related office visits total gross in the United States was 5.8 million in 2004 and 6.9 million in 2005 (1). The demographics of the US population is shifting to a greater number of persons over forty. Of the one hundred million presbyopes in the US in 2005, 2.5% were contact wearers. This is a twenty percent increase over the previous year. A typical soft contact lens wearer can produce approximately two hundred and forty dollars a year in revenue for an optometrist (2). With these figures in mind, today’s optometrist must be proactive and efficient with patient education and management to ensure a successful practice. Liability exists with any doctor-patient relationship. Because there are more risks with contact lens wear, there is a greater likelihood of liability issues in today’s optometric offices.

“Making patients happy is not just good practice, it is also probably the best protection we have against lawsuits. The secret to making patients happy lies in developing good communication skills. Good communication skills start with an attitude of empathy and caring, and of letting patients know directly and indirectly that they are important.”(3)
Proper education can prevent almost all of the complications that can occur with contact lens wear. Patient non-compliance of contact lens care increases the occurrence and severity of common contact lens related problems. Contact lens misuse can result in a chronic hypoxic state of the cornea. This state “can result in the development of microcysts owing to such causes as excessive wearing time and reduced corneal oxygen levels from aging lens material, a tight-fitting lens, or excessive coating and deposits on the lens” (4). Other common contact lens problems include corneal neovascularization, corneal ulcers, and corneal abrasions (3). Many cases of contact lens misuse have resulted in poor outcomes. One case included a fourteen year old patient with a bacterial infection that damaged the cornea to the extent that a corneal transplant was required. A corneal abrasion resulted in one patient that purchased contacts at a costume store. This patient did not receive any education on how to care for his lenses nor was he properly fit with the lenses he purchased (5). A significant increase in the incidence of contact lens-related ulcers was noted in between 1999 and 2002 in a study done at the Corneal Service of the Wills Eye Hospital. These facts could infer that less effective patient education is taking place in optometric practices. With current demographics and a growing population of contact lens wearers, it is imperative that doctors fitting contact lenses today are thorough in patient education.
There are many benefits to having an organized method of handling contact lens patients from the initial handshake to the final prescription being given to the patient. Organized practices present a professional image of your office and help patients to feel they are being taken care of for their contact lens needs. When patients are well informed and educated they are more likely to return to your office for care. Educating a patient is a way to reinforce the doctor-patient relationship, not only for problems that may occur with their contacts, but with the complete care of the patient. Approximately 2.7 million Americans drop out of contact lens wear each year (6). These drop outs may be due to problems that the patient did not address with the doctor after they left the office or could been addressed on an instruction sheet that they take home. A consistent method of educating patients in contact lens care also helps to train staff and prevent misinformation being presented to your patients. This consistency with educating patients not only decreases the risk of liability, but also helps the doctor to see more patients in less time.

Becoming a new contact lens wearer is an exciting process. Patients can be easily overwhelmed by all the information about inserting and removing their lenses that they can forget to ask questions that they may have. Also, they are unable to retain all of the verbal instructions that they are being given. Written instructions reinforce the verbal education that the patient received in the office. Written materials also help answer
questions that the patient may have forgotten after they have left the office. Good contact lens instruction sheets should include basic rules for good contact lens hygiene and also indicate bad contact lens habits. The format of the instruction sheets should be prioritized in an order that begins with the most important statement at the beginning of the list. Complications that may occur with non-compliance should be listed on the instruction sheet so that patients are aware of the risks that come with contact lens wear. It is also advantageous to include areas were the technicians can write in specific instructions for the patient as specified by the doctor. Such instructions may include wearing schedule and solution to be used.

Up to thirty-five percent of an optometric practice can be comprised of contact lens wearers. Optometrists can not afford to lag behind in acquiring and retaining their contact lens patients. An organized method in handling contact lens patients helps to reduce risk to the patient, legal risk to the optometrist, and miscommunication between the doctor and the patient.
REFERENCES


