Patient Label	

Visual acuity and color perception should be evaluated for all clients before ethambutol or other second line drugs (linezolid, clofazimine, ethionamide, rifabutin) are initiated. If a client starts medications prior to the local health district becoming aware of the client, without baseline screening, screening should occur before continued treatment is provided by the health district. Continue monthly vision exams while the client is taking these medications. To document final visual status, perform the last screening when these medications are discontinued. The goal of monthly vision screening is to capture any changes in vision (acuity or color perception) and notify the treating clinician immediately.

Visual Acuity - assessed using a Snellen chart

Color Discrimination - assessed using Ishihara test plates

Date	Visual Acuity		Color Discrimination	Initials of health care	Comments
	Right Eye	Left Eye	Both Eyes	worker	Comments
	/	/	/		Baseline Testing
	/	/	/		
	/	/	/		
	/	/	/		
	/	/	/		
	/	/	/		
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	/	/	/		
	/	/	/		

Color Discrimination testing instructions:

The Ishihara test plates should be held at an arm's length from the eyes for the test. The first test plate in the Ishihara book should be recognizable by everyone (even those with color deficiency). The client should be shown at least one test plate from each of the groups of colors in the book (getting progressively more difficult). Document the number of plates the client reviewed and how many were recognizable.