



Ametropia/Ophthalmic Optics CAP Assessment Form 3 – September 2025

SECTION 1: REFERENCE-BASED QUESTIONS (questions 1-12)

These questions are based on the references listed below, which emphasize new information or clinical guidelines relevant to ametropia and ophthalmic optics.

See page 3 for learning objectives for each topic area.

Topic: Cause of non-tolerance to new spectacles (questions 1-3)

Reference: Beesley J, Davey CJ, Elliott DB. What are the causes of non-tolerance to new spectacles and how can they be avoided? *Ophthalmic Physiol Opt.* 2022 May;42(3):619-632.

<https://pmc.ncbi.nlm.nih.gov/articles/PMC9303957/pdf/OPO-42-619.pdf>

Topic: The role of vision in falls management (questions 4-7)

Reference: Mehta, J, Baig, A. The importance of assessing vision in falls management: A narrative review. *Optometry and Vision Science* 102(2): p 110-120, February 2025.

https://journals.lww.com/optvissci/fulltext/2025/02000/the_importance_of_assessing_vision_in_falls.11.aspx

Topic: Myopia management (questions 8-12)

Reference: Cooper, J; Aller, T; Smith, EL; Chan, K; Dillehay, S; O'Connor, B. Retrospective Analysis of a Clinical Algorithm for Managing Childhood Myopia Progression. *Optometry and Vision Science* 100(1): p 117-124, January 2023

https://journals.lww.com/optvissci/fulltext/2023/01000/retrospective_analysis_of_a_clinical_algorithm_for.18.aspx

SECTION 2: FUNDAMENTAL KNOWLEDGE QUESTIONS (questions 13-25)

These questions are considered “fundamental knowledge” within the areas of ametropia and myopia management. This is information that has not changed substantially in the past 5-10 years, and with which all optometrists should be familiar or be able to access quickly.

The following outline is provided as a general guide for this section.

- I. Spectacle correction of ametropia
 - a. Distribution of refractive errors based on age, ethnicity
 - a. Patient education on safety factors of eyewear and materials
 - b. Spectacle lens designs or optical materials recommendations
 - c. Prismatic correction (slab off, induced prism)
 - d. Troubleshooting issues due to spectacle lens fabrication or frame selection
 - e. Interpretation of basic exam findings
 - f. Vertex distance and effective power
 - g. Basic frame adjustments
- II. Vision rehabilitation/low vision
 - a. Collection of specific patient history and demographic data
 - b. Specific testing to assess visual status and determine management plan



Ametropia/Ophthalmic Optics CAP Assessment Form 3 – September 2025

- c. Treatments offered by primary care optometrists (high adds, simple magnifying devices, lighting recommendations, lifestyle changes)
 - d. Knowledge of treatment/management techniques used by vision impairment/low vision specialists
- III. Myopia management
- a. Patient education regarding risk factors and lifestyle options
 - b. Optical management: dual-focus CL designs, orthokeratology, spectacles
 - c. Pharmaceutical management

References: These references are recommended for review of fundamental knowledge topics, but are not required.

Clinical Report: Myopia Management. American Optometric Association, 2021.
<https://aoa.uberflip.com/i/1388672-ebo-myopia-clinical-report-no-spread/0?>

Freeman K, et al. Optometric Clinical Practice Guideline Care of the Patient with Visual Impairment (Low Vision Rehabilitation), American Optometric Association CPG-14, 2007.
<https://www.aoa.org/AOA/Documents/Practice%20Management/Clinical%20Guidelines/Consensus-based%20guidelines/Care%20of%20Patient%20with%20Visual%20Impairment%20%28Low%20Vision%20Rehab%29.pdf>

Benjamin, W. *Borish's Clinical Refraction*, 2nd ed. Butterworth-Heinemann, 2006.

Brooks C, Borish I. *System for ophthalmic dispensing*. 3rd ed. Butterworth-Heinemann. 2007



Ametropia/Ophthalmic Optics CAP Assessment Form 3 – September 2025

Learning Objectives

Reference 1: Beesley J, Davey CJ, Elliott DB. What are the causes of non-tolerance to new spectacles and how can they be avoided? *Ophthalmic Physiol Opt.* 2022 May;42(3):619-632.
<https://pmc.ncbi.nlm.nih.gov/articles/PMC9303957/pdf/OPO-42-619.pdf>

The learner will be able to:

- Identify the primary causes and the frequency of non-tolerance to new spectacles
- Discuss the results of this study with respect to the common maxims “If it ain’t broke, don’t fix it” and “Maximum plus for maximum VA”
- Describe and discuss the authors’ recommendations for preventing non-tolerance issues
- Discuss the quality of the recheck corrections analyzed in the article and the primary reasons for the unsatisfactory corrections

Reference 2: Mehta, J, Baig, A. The importance of assessing vision in falls management: A narrative review. *Optometry and Vision Science* 102(2):p 110-120, February 2025.
https://journals.lww.com/optvissci/fulltext/2025/02000/the_importance_of_assessing_vision_in_falls.11.aspx

The learner will be able to:

- Describe how each of these key visual domains – VA, contrast sensitivity, stereoacuity and VF – relates to the risk of falls in older patients
- Identify which visual functions are most predictive of fall risk and which screening tests are most useful for a fall risk assessment
- Discuss the optometrist’s role in fall risk assessment

Reference 3: Cooper, J; Aller, T; Smith, EL; Chan, K; Dillehay, S; O'Connor, B. Retrospective Analysis of a Clinical Algorithm for Managing Childhood Myopia Progression. *Optometry and Vision Science* 100(1): p 117-124, January 2023
https://journals.lww.com/optvissci/fulltext/2023/01000/retrospective_analysis_of_a_clinical_algorithm_for.18.aspx

The learner will be able to:

- Articulate the design of the study discussed in this article, including the inclusion criteria for participants, the treatment modalities, and the outcome measures
- Cite the results of the study, specifically:
 - CSER progression for each of the 3 years of the study
 - Axial elongation for each of the 3 years of the study
 - Cumulative reduction in axial elongation each of the 3 years of the study
- Discuss the key features of the clinical algorithm used in this study and the trends the authors noted over the 3-year period (i.e. how did the treatment change)



**Ametropia/Ophthalmic Optics CAP Assessment
Form 3 – September 2025**

- Articulate the key findings and the major limitations of this study