

SETTING

Local Optometry Clinic

PATIENT

You are 42 years old and are far-sighted. You use prescription glasses. You recently experienced a severe headache that caused vision problems for 20 minutes. It was the first time you have experienced anything like this. The optometrist has just examined your eyes and checked your prescription.

TASK

- When asked, say you had the headache and vision problems a couple of days ago. You had some trouble focusing and then saw flashing lights on the right-hand side of your vision, in the right eye, for about 20 minutes. Your vision went back to normal but you had a severe headache. When asked, say you didn't see any floaters or anything else. Your eyes were just sensitive to the light.
- When asked, say you didn't feel sick or vomit but you're concerned because you've never had anything like this before; you wonder if it's just because your glasses prescription was wrong.
- Say an ocular migraine sounds serious. You hope it doesn't mean that there will be permanent damage to your eyes.
- When asked, say you don't smoke or have high blood pressure. You sometimes feel stressed at work; you're an aircraft maintenance engineer. You know you don't drink enough water. You sometimes skip meals when you're busy. You hope you can get something to take in case you get a migraine like this again.
- Say you'll follow that advice; you just hope you don't get another migraine.

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OPTOMETRIST

Your 42-year-old patient, who has hyperopia (far-sightedness) and uses prescription glasses, has recently experienced a headache and vision problems for the first time. You have just examined the patient's eyes and checked his/her prescription. You suspect an ocular migraine.

TASK

- Find out more about patient's symptoms (onset, difficulty focusing, flashing lights, one or both eyes, headache, etc.). Find out more details (any floaters/blobs, sensitivity to light, etc.).
- Explore any other symptoms (e.g., nausea, vomiting, etc.).
- Give findings of eye examination (e.g., glasses prescription correct: unlikely to cause problem, etc.). Give likely diagnosis of ocular migraine (restriction of blood flow to eye/sudden narrowing of blood vessels, etc.). Explain need for further tests (e.g., dilated retinal examination, visual field examination, etc.).
- Reassure patient about ocular migraines (e.g., temporary, long-term damage: rare, etc.). Outline common triggers (smoking, hypertension, stress, dehydration, low blood sugar, etc.). Explore relevance of these to patient.
- Emphasise no specific treatment for ocular migraines available (e.g., usually self-resolving, etc.). Describe likely cause for this patient (e.g., stress at work, dehydration, etc.). Make recommendations for management of symptoms (e.g., avoiding triggers, painkillers for headache, resting eyes, etc.). Outline next steps (e.g., tests, doctor appointment: excluding other conditions, etc.).