This Myopia Moment gives you a brief overview of the measurements to include in an eye examination of a child with myopia or at risk of developing myopia. Please refer to the source references for more details.

### Patient History
A Detailed Patient History Should Include the Following:
- Family history of refractive error. *(parents and siblings)*
- Time spent on near work and using digital devices.
- Date of myopia onset if present.
- Any previous treatment for myopia.

### Standard Procedure
#### Distance and Near Visual Acuity
*Uncorrected and best corrected*
- Use age-appropriate chart.
- Record findings for monitoring and follow-up.

#### Ocular Health Check
- Internal.
- External.
- Intraocular pressure.

### Refraction
*(subjective and/or objective)*
- Children at risk for developing myopia may be identified by comparing their refractive status to the normal refraction for their peer group.

### Accommodative and Binocular Vision (BV) Testing
- Even before myopia develops, children may show BV disorders.
- Watch out for reduced accommodative response, increased accommodative lag and higher AC/A ratios.

### Myopia Related Measurements
#### Cycloplegic Refraction Including Drops
*(Best Practice)*
**Why?**
For added precision assessing young children who may not be able to verbalize their vision issues.

**How?**
2 drops of 1% tropicamide or cyclopentolate, 5 minutes apart. Refraction 30 to 45 minutes after first drop.

**Alternative Method**
Retinoscopy with accommodation well controlled.

#### Fundus Check
**Why?**
To document if there are early features of myopia-related pathology.

**How?**
Thoroughly examine central and peripheral retina under dilation, and where possible, record observations using OCT and/or fundus photography.

#### Axial Length Measurement (AL)
**Why?**
To assess risk of developing myopia and to monitor progression.

**How?**
- Preferably use a non-contact optical biometer.
- Risk scenario: AL is >25 mm with growth of 0.2 to 0.3 mm/year.

#### Tear Film Evaluation
**Why?**
To guide clinical decision making on optical interventions, particularly contact lenses, so that they can be worn comfortably and compliantly.

**How?**
Ask probing questions and use a slit lamp biomicroscopy to examine the anterior eye.

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