



# Eye Health Center of Troy

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## Medicine Resident Teaching Series: Fundus Exam

Start with dilated pupil.

Have patient look faraway at a distant target.

Look for red reflex and follow it getting closer to the patient.

Use right eye for right eye—and left eye for left eye—that way noses do not get in the way.

Focus on a vessel and trace it to the optic nerve. Know the anatomy of a normal optic nerve. You will, then, be able to identify a bad papilledema or bad optic atrophy. Anything in between, if new and concerning in the context of patient's situation, will need to be seen by eyecare professional.

If you got the optic nerve, try to look at the macula. This is the area just temporal to optic nerve and a normal macula is evenly pigmented, devoid of any major blood vessels. Activity in this area is not good. Whitish/yellowish deposits are generally exudates. Red areas are hemorrhages. If you suspect these think diabetic or hypertensive retinopathy and if there is a coexisting vision change, an ophthalmology consult is needed.