

July 2020

Thomas Holmes
fyi-request-13156-fdc11ed6@requests.fyi.org.nz

Dear Thomas

Request for information

Thank you for your request dated 26 June 2020 requesting Ophthalmic Standards for N.Z. Police; Accredited Vision Examiner Protocol.

Your request has been considered in accordance with the Official Information Act 1982 and I enclose the following information:

1. NZ Police Ophthalmic Standards - accredited vision examiner protocol
2. NZ Police Visual Standards 2017 – update to Policy July 2014
3. NZP_Final-Visual-Examination-Report-2020

You have the right, under section 28 (3) of the Official Information Act 1982, to ask the Ombudsman to review my response if you are not satisfied with the way I have responded to your request.

Yours sincerely



Mel Aitken
National Manager, Safer People

Police National Headquarters

180 Molesworth St, Wellington
Telephone: 04 474 9499 www.police.govt.nz



OPHTHALMIC STANDARDS FOR N.Z. POLICE

ACCREDITED VISION EXAMINER PROTOCOL

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OPHTHALMIC STANDARDS FOR N.Z. POLICE

ACCREDITED VISION EXAMINER PROTOCOL

1 Introduction

Police must be visually competent to drive powerful vehicles safely during the day and at night, in adverse weather and at high speeds. They are also required to perform a range of visual tasks appropriate for their rank. To ensure that candidates and serving officers maintain a satisfactory level of performance under marginal visual conditions, the Visual Standards for the N.Z. Police as detailed below will be subject to periodic review. They reflect the advances in clinical science and refractive surgery.

The file name of the current standard is in the footer below - all previous versions of this document should be destroyed.

All recruit/applicants and sworn officers who have undergone corneal refractive surgery or have ocular pathology, must meet the visual performance criteria for the Police.

2 Clinical Assessment

Two levels of clinical assessment are proposed;

Level 1 – for recruit/applicants who have not undergone corneal refractive surgery, who have normal healthy eyes, &

Level 2 – for recruits who have undergone corneal refractive surgery, or have ocular conditions that might compromise their visual performance and for sworn officers whose annual performance appraisal has raised questions about their visual status.

3 Accredited Vision Examiner

Accredited Vision Examiners [AVE's] are selected from ophthalmic practitioners who undertake to perform the range of visual examination procedures specified in this protocol, utilising the specified test equipment.

Accredited Vision Examiners enter into a contract to perform visual examinations at Level 1 only [Level 1 Accredited Vision Examiners], or for

Level 1 + 2, [Level 2 Accredited Vision Examiners].

The majority of visual performance assessments will be for recruit/applicants meeting the Level 1 criteria requiring equipment, which if not already universally available, is not expensive and is easily obtained.

For the extra visual standards required for a Level 2 assessment, involving more expensive diagnostic equipment, it is anticipated that Examiners may be strategically located in the main centres, and those recruit/applicants or sworn officers requiring a Level 2 assessment, will travel to these locations.

If a recruit applicant or sworn officer has undergone corneal refractive surgery they shall be examined by an independent Accredited Vision Examiner, who has neither performed the surgery, or has any commercial interest in the facilities where the refractive surgery was undertaken.

4 Performance Standards Monitoring

Should the clinical outcomes of an Accredited Vision Examiner be called into question, the Manager, Wellness and Safety may inspect their equipment and facilities. If the unsatisfactory performance cannot be explained, the Manager, Wellness and Safety may withdraw the accreditation of the Examiner.

5 Policy for Specified Ocular Conditions

Recruit/applicants with the following specified ocular conditions will NOT meet the entry criteria for the N.Z. Police:

5.1. Keratotomy (R.K. & A.K.), & Keratoplasty

The criteria for recruit/applicants are NOT met if they have undergone:

- a) radial or astigmatic keratotomy
- b) keratoplasty

Sworn Officers

Sworn officers who have undergone keratoplasty or radial or astigmatic keratotomy, shall be identified and assessed as set down in Secs 3.1, 3.4, 3.5, 3.6, 3.7 & 3.8 of the standards document - Rationale & References, to determine that they are visually competent to drive Police vehicles and perform the range of duties required of their rank. Reassessment of their visual fitness shall be required at regular intervals as indicated by the rate of deterioration of the condition.

5.2 Photo Refractive Keratectomy (PRK), Laser Assisted Sub-epithelial Keratectomy (LASEK) & Laser in Situ Keratomileusis (LASIK)

Before undertaking a visual examination for the NZ Police, the AVE must be satisfied that the candidate meets the pre-conditions of Criteria 5.2. a, b, c, & d, set out below.

Criteria for 5.2

The criteria for recruit/applicants are NOT met if:

- a) - there is evidence in either eye of:

 - myopic retinopathy/maculopathy,
 - posterior staphyloma
 - retinal tears or holes,
 - retinal degenerations predisposing the eye to retinal tears or holes,
 - vitreoretinal traction or acute PVD, or
 - retinal detachment,*
- b) there is a history of photo-coagulation or cryotherapy to treat retinal tears, holes, or to reattach the retina*

- c) less than three months has elapsed from the date of the primary PRK, LASEK or LASIK treatment, or from the date of any subsequent re-treatment*
- d) they have undergone any alternative corneal refractive surgery other than PRK, LASEK or LASIK, or any procedure intended to permanently modify the corneal shape for the purposes of correcting a refractive error and less than one year has elapsed from the date of that procedure, or any subsequent re-treatment.*
- e) they cannot achieve the visual standards detailed in Level 1 + 2.*

Sworn Officers

Sworn Officers who have undergone RK PRK, LASEK, or LASIK, [or any alternative corneal refractive surgery] shall be identified and assessed as set down in Secs 3.1, 3.4, 3.5, 3.6, 3.7 & 3.8 of the standards document - Rationale & References, to determine that they are visually competent to drive Police vehicles and perform the range of duties required of their rank.

5.3 Glaucoma

The criteria for recruit applicants are NOT met:

- a) if an applicant with glaucoma is unable to*

Sworn Officers

Sworn officers with defects in the optical media shall be assessed as set down in Secs 3.1, 3.4, 3.5, 3.6, 3.7 & 3.8 of the standards document - Rationale & References, to determine that they are visually competent to drive Police vehicles and perform the range of duties required of their rank.

meet any of the visual standards detailed in Level 1 + 2.

5.4 Defects in the Optical Media

The criteria for recruit/applicants are NOT met:

- a) if an applicant exhibiting defect/s of the optical media, fails to meet the criteria detailed below for vision and visual acuity,*

low luminance visual acuity, plus the standards detailed in Level 2.

5.5 Aphakia

The criteria for recruit/applicants are NOT met a) if an applicant is unable to read N5 through their reading spectacles at a distance of 50cms.

Sworn Officers

Sworn officers who are aphakic, but who have not had intra ocular lens/es implanted shall be assessed as set down in Secs 3.1, 3.4, 3.5, 3.6, 3.7 & 3.8 of the standards document - Rationale & References, to determine that they are visually competent to drive Police vehicles and perform the range of duties required of their rank.

6 Policy for Visual Aids

Recruit/applicants who are accepted for Police training and require visual aids are recommended to use either hydrophilic contact lenses or spectacles preferably fitted with polycarbonate or acrylic lenses, or alternatively with chemically or heat toughened glass lenses.

Vacuum coated or photochromatic glass sunglasses [prescription or plano], shall be chemically toughened, or if dyed [acrylic lenses], shall be brown or grey tinted. The tinted lenses shall have a luminous transmittance of not less than 25%.

Sworn officers are not permitted to wear mirrored lenses.

7 Clinical Assessment Protocol

This Clinical Assessment Protocol should be read in conjunction with the background document:

‘Ophthalmic Standards for N.Z. Police - Rationale and References’.

Accredited Vision Examiners will be expected to carry out a visual examination of a recruit/applicant utilising their normal clinical routine, but they will be required to assess the visual standards for the N.Z. Police, utilising the protocol specified in this document.

The clinical assessments will involve the use of equipment not necessarily found in every Practice,

but adhering to the protocol should result in uniformity and repeatability of results.

The following visual standards shall be assessed by an Accredited Vision Examiner – Level 1

- vision and visual acuity Sec 7.1.1
- visual fields Sec 7.1.2
- colour perception Sec 7.1.3
- diplopia (binocular stability) Sec 7.1.4
- low luminance visual acuity Sec 7.1.5

7.1 Level 1

7.1.1 Vision and Visual Acuity

Unaided vision or corrected visual acuity shall be measured by a logMAR high contrast chart with a luminance in the range of 85 to 100cd/m² [external illumination of about 300lux.]

Henceforth reference to:

- *vision implies unaided vision, &*
- *visual acuity implies corrected visual acuity.*

Note: Vision and Visual Acuity shall be determined with the lids in a relaxed state.

The measurement of Vision and Visual Acuity has an inherent uncertainty of approximately +/-3 letters on a Bailey-Lovie chart. Accredited Assessors may exercise their professional judgement as to whether or not a candidate achieves a pass or fail, if their results fall within this standard deviation. This judgement shall apply to high contrast, low contrast vision and visual acuity, as well as to disability glare and low luminance visual acuity.

Criteria

The criteria for recruit/applicants are NOT met:

- a) *if an applicant makes more than two errors in the 6/12 [logMAR 0.3] line with each eye uncorrected, [VAR < than 83],*
- b) *if an applicant makes more than two errors in the 6/6 [logMAR 0.0] line with each eye corrected, [VAR < than 98].*

Sworn Officers

Sworn officers are expected to maintain their visual acuity to the level at which they make no more than two errors in the 6/9 line. [VAR < than 88] Sworn officers will not have their vision routinely examined. However if their visual performance is questioned while undergoing a performance appraisal, they may be required to undergo an assessment as set down in Secs 3.1, 3.5, 3.6, 3.7 & 3.8 of the standards document - Rationale & References, to determine that they are visually competent to drive Police vehicles and perform the range of duties required of their rank

Payment for visual aids to maintain visual acuity is the responsibility of the Police officer

7.1.2 Visual Fields

Visual fields shall initially be assessed by confrontation. Perimetry shall be performed to quantify any defect detected by confrontation. Visual fields shall be assessed when there is evidence of pathology in the retina or ocular pathway.

Criteria

The criteria for recruit/applicants are NOT met if an applicant has:

- a) *monocular vision, any abnormality of visual fields to confrontation, bitemporal or homonymous hemianopia.*
- b) *less than 140° of horizontal field or a vertical field of less than +/- 45° above and below the midline.*
- c) *a central or paracentral, relative or absolute scotoma likely to compromise visual performance under mesopic luminances, resulting in prolonged glare recovery or constituting a handicap for driving.*

Sworn officers

If the adequacy of a visual field of a sworn officer is questioned while undergoing a performance appraisal, they may be required to undergo visual field testing as above, to determine that they are visually competent to drive Police vehicles and perform the range of duties required of their rank.

7.1.3 Colour Perception**Criteria**

Colour vision shall initially be assessed with the 24 plate edition of the pseudo-isochromatic Ishihara Test in daylight or artificially illuminated with Illuminant 'D65'. Where three or more errors are made on plates 2 to 17, further assessment is required. This shall be by a diagnostic colour perception test such as the 100 Hue, D15 or a Farnsworth Lantern, and confirmed with either the Medmont C100 or Oscar Colour Vision Tester.

The criteria for recruit/applicants are NOT met if either the:

- a) *100Hue, D15 or the Farnsworth Lantern is failed, or*
- b) *recruit/applicant is a protan.*

[A protanomalous recruit applicant may appeal, and if passed using the Holmes Wright lantern - small apertures, they shall meet the criteria.]

7.1.4 Diplopia, Strabismus & Monocularity**Criteria**

The criteria for recruit/applicants are NOT met if the applicant has:

- a) *diplopia from whatever cause, whether persistent or recurrent,*
- b) *a manifest strabismus which is cosmetically noticeable, or*
- c) *anatomical monocularity.*

Sworn officers

Sworn officers will not have their vision routinely tested for diplopia, but if their visual performance is questioned because of diplopia, they may be required to undergo an examination to ensure that they are visually competent to drive Police vehicles and perform the range of duties required of their rank.

Sworn Officers

Sworn officers who have undergone PRK, LASEK, LASIK, [or any alternative corneal refractive surgery], have been affected by glaucoma, or have cataracts, shall be assessed as set down in Secs 3.1, 3.5, 3.6, 3.7 & 3.8 of the standards document - Rationale & References, to determine that they are visually competent to drive Police Vehicles and perform the duties required of their rank.

7.2 Level 2

If a recruit applicant or sworn officer has:

- undergone PRK, LASEK, LASIK, [or any alternative corneal refractive surgical procedure currently available or any that may be developed in the future],
- defects in the optical media
- glaucoma,

the following additional assessments shall be performed by an Accredited Vision Examiner – Level 2:

- glare disability Sec. 7.2.1
- dark adaptation Sec. 7.2.2
- contrast sensitivity Sec. 7.2.3

7.2.1 Glare Disability

Criteria

The criteria for recruit/applicants are NOT met: if the applicant viewing the high contrast letter chart while in the presence of the glare source, produced by either the:

- a) *BEGAT with the glare level set at the HIGH setting,*
- b) *Brightness Acuity Tester (BAT) with the glare level set at the MEDIUM setting, or*
- c) *Brightness Acuity Tester (MARCO BAT 1000) with the glare level set at the MEDIUM setting, & has a high contrast visual acuity in either eye, that is worse than 6/7.5, < logMAR 0.1, or < VAR = 95]*
i

7.2.2 Dark Adaptation and Night Vision

Criteria

The criteria for recruit/applicants are NOT met: if there is retinal pathology or a congenital abnormality present or is a history of familial retinal disease (such as retinitis pigmentosa).

Candidates shall be referred to an approved specialist for assessment for the prognosis of the disease and the implications for the maintenance of visual standards.

Sworn officers

Sworn officers with retinitis pigmentosa, glaucoma and choroido retinitis shall be assessed as set down in Secs 3.1, 3.5, 3.6, 3.7 & 3.8 of the standards document - Rationale & References, to determine that they are visually competent to drive Police vehicles and perform the duties required of their rank.

7.2.3 Contrast Sensitivity Function

To achieve a rapid and adequate estimation of the overall nature of the contrast sensitivity function, two measurements shall be made for each eye:

- 1) low contrast [10% contrast] visual acuity, &
- 2) the contrast threshold for an “edge” stimulus utilising either the:
 - a) original hand held Melbourne Edge Test (MET), evenly illuminated between 18 and 85 cd/sq-m and held between 40 & 50cm,
 - b) BEGAT version of the Melbourne Edge Test (MET) test internally illuminated at 310 cd/sq-m and scaled for a working distance of 100cm, or ⁱⁱ
 - c) NVRI version of the Melbourne Edge Test (MET) test internally illuminated with a battery powered light box.

Criteria

The criteria are NOT met if a recruit/applicant:

a) has a low contrast visual acuity in either eye, that is worse than 6/9, < logMAR 0.2, or < VAR = 90], &

b) when assessed on the MET, has a contrast threshold < 17.0dB in either eye. [= to an edge contrast sensitivity of 70] (95% confidence level) ⁱⁱⁱ

8 Reporting

The result of the vision assessment of a applicant/recruit or sworn officer shall be reported on the form:

‘Visual Examination Report – Ophthalmic Standards for the N.Z. Police’.

The Visual Examination Report shall then be forwarded to the:

Medical Clearance Co-ordinator

Attention: Briar Campbell

**Level One - Recruiting
Police National Headquarters
P.O. Box 3017
WELLINGTON 6140**

Endnotes

ⁱ Elliott & Bullimore (1993) ²⁾ show that, on the average, the addition of medium glare from the BAT:

- I. made NO difference to the acuity of young normal subjects (24yrs +/- 3.3 yrs) and
- II. induced a 3 to 4 letter reduction to the acuity of older normal subjects (66yrs +/- 6 years).

As the standard deviation for measurements with or without glare was the same +/- 3 to 5 letters on the Bailey Lovie chart, the 95% confidence interval for change would be an acuity reduction of less than 6 to 8 letters.

In summary, these data state that there should essentially be no change in acuity for young subjects when subjected to glare. However as the measurement of acuity is imprecise, and for a 95% certainty of a change due to glare, a loss of 6 to 8 letters of acuity is allowed.

Bailey & Bullimore (1991) ¹⁾ reported results from the Berkeley (surround) glare tester. Their study supported previous work which demonstrated that susceptibility to disability glare increases with age and that the test is sensitive to relatively subtle changes in nuclear sclerosis or corneal edema.

ⁱⁱ Woods & Wood (1995) ⁸⁾ determined that the average monocular score for a MET chart, evenly illuminated between 18 and 85 cd/sq m, viewed at between 40cm & 57cm, by persons of an average age of 50yrs, was 20.5dB. They noted that there is little correlation between age and the MET result.

ⁱⁱⁱ Verbaken & Johnston (1986) ⁷⁾ indicated that the standard deviation for a clinical population would be about +/- 1.5dB to +/- 2.0dB [Note: converting from their formula of:

$$\text{dB} = -20 \times \log(\text{contrast})$$

to the one used for decibels in the MET:

$$\text{dB} = -10 \times \log(\text{contrast})$$

Therefore a significant (to the 95% level) departure from the normal (in the worsening direction) would be between 20.5 - 3.00 = 17.5dB and 20.5 - 4.00 = 16.5db.

10 References

- 1) Bailey IL, Bullimore MA. "A New Test for the Evaluation of Disability Glare" *Optometry & Visual Science* Vol.68, No.12, pp911-917
- 2) Elliott DB & Bullimore MA "Assessing the reliability, discriminative ability and validity of disability glare tests" *Invest Ophthal & Vis Sci* 1993;35:108-119

- 3) Jacobs RJ, Hendicott PL, Murphy B, Poppelwell D, Turner PJ. "Visual performance requirements for post-PRK police recruits" *Clin. & Exp. Optom*, 1998;81:163-173

- 4) Kreuger RR et al. "Clinical analysis of excimer laser photorefractive keratectomy using a multiple zone technique for severe myopia" *Amer J of Ophthal* Mar 1995;119:263-275

- 5) Maguire LJ & Bechara S "Epithelial distortions at the ablation zone margin after excimer laser photorefractive keratectomy for myopia" *Letters to the Journal Amer J of Ophthal* Jun 1995 1995;117:809-810.

- 6) "Medical Examinations of Commercial Vehicle Drivers" Prepared for the: National Road Transport Commission and the Federal Office of Road Safety, by the Australasian Faculty of Occupational Medicine. Nov 1995 ISBN 0 652 21209 0

- 7) Verbaken JH & Johnston AW "Population norms for edge contrast sensitivity" *Amer J Optom & Physiol Optics* 1986;63:725-732.

- 8) Woods RL & Wood JM "The role of contrast sensitivity charts and contrast letter charts in clinical practice". *Clinical and Experimental Optometry* 1995; 78: (2) 53-57.

NZ Police Visual Standards – update to Policy July 2014

Please note the following changes to the NZ Police Ophthalmic Standards:

1. Low luminance is no longer being tested.
2. An ophthalmological certificate is no longer required post corneal refractory surgery.
3. Binocular vision is now requested and taken into account with borderline pass/fail.
4. A note to ensure that a level I & II examination is required for all applications with a history of corneal refractory surgery 3 months post procedure OR a level I examination with a report from eye surgeon confirming nil issues post operatively.
5. A request that optometrists do NOT retain copies of NZ Police visual documentation – these are dynamic in nature and subject to regular review, as such from 1st July only new NZ Police Visual paperwork (as attached) will be accepted.

Final Visual Examination Report

Information for Applicants

This report is to be completed by a NZ Police approved optometrist. Please then return this questionnaire (pages 1-3) either by scanning and emailing to recruitment.medicals@police.govt.nz, or sending the report to:

Medical Recruitment Team
Royal New Zealand Police College
Private Bag 50906
Porirua 5024

Police pay for this “Final Visual Examination” only.

IMPORTANT: There will be no guarantee of payment for additional tests or investigations without NZ Police’s authority. There is currently nil requirement for OCT as part of a routine eye examination for new recruit applicants. Any additional investigations will be at the applicant’s expense.

Please get your Optometrist to ensure that **the invoice includes the cost centre number 70758**, is made out to "NZ Police (New Recruit)", and returned to **Shared Services, PO Box 2797, Wellington 6140**.

For any invoicing queries please contact the NZ Police accounts team directly at AccountsProcessing@police.govt.nz or 04 238 6710 ext. 43710.

The information collected from you on this Visual Examination Report is required by NZ Police for the purpose of assessing your suitability to join NZ Police as a recruit. If you are selected as a recruit, this information will be retained on your medical file and may be used and/or disclosed for the purpose of ensuring you maintain your health while an employee of NZ Police.

PERSONAL DETAILS

Family name

First names

Address

Home phone

Mobile phone

Date of birth

Email address

MEDICAL INFORMATION

1. Are any of the following ocular conditions present:

1.1 Keratotomy - Radial (R.K), or Astigmatic (A.K), Keratoconus or Keratoplasty			
1.1.1 Keratotomy (R.K., or A.K)	Yes <input type="checkbox"/>	Fail <input type="checkbox"/>	No <input type="checkbox"/> Pass <input type="checkbox"/>
1.1.2 Keratoconus	Yes <input type="checkbox"/>	Fail <input type="checkbox"/>	No <input type="checkbox"/> Pass <input type="checkbox"/>
1.1.3 Keratoplasty	Yes <input type="checkbox"/>	Fail <input type="checkbox"/>	No <input type="checkbox"/> Pass <input type="checkbox"/>
			PASS <input type="checkbox"/>
1.2 PRK, LASEK, LASIK, or alternative corneal refractive procedure			
1.2.1 Any corneal refractive procedure	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Go to 1.2.2	Go to 1.3	
1.2.2 Has at least 3 months elapsed from a PRK, LASEK, LASIK treatment or re-treatment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Date: _____	Do not proceed	
1.3 Glaucoma	Yes <input type="checkbox"/>	Fail <input type="checkbox"/>	No <input type="checkbox"/> Pass <input type="checkbox"/>

1.4 Defects in the Optical media	Yes <input type="checkbox"/> Fail	No <input type="checkbox"/> Pass
1.5 Aphakia Note: IOLs must be implanted in both eyes to pass.	Yes <input type="checkbox"/> Fail Go to 1.5.1	No <input type="checkbox"/> Pass Go to 2
1.5.1 Any corneal refractive procedure	R.E. <input type="checkbox"/> L.E. <input type="checkbox"/>	IOL <input type="checkbox"/> IOL <input type="checkbox"/>

LEVEL 1 ASSESSMENT

2. Vision and visual acuity

2.1 Uncorrected vision	R.E. 6/ ____ +/- ____ letters L.E. 6/ ____ +/- ____ letters
2.2 Uncorrected binocular vision Fail if worse than 6/12 (logMAR 0.3) - 2 letters = VAR < 83.	____
2.3 Corrected vision Fail if worse than 6/6 (logMar 0.0) - 2 letters, CAR < 98 in either eye.	R.E. 6/ ____ +/- ____ letters L.E. 6/ ____ +/- ____ letters
PASS <input type="checkbox"/>	

3. Visual fields

3.1 Monocular vision	Yes <input type="checkbox"/> Fail	No <input type="checkbox"/> Pass
3.2 Abnormal fields to confrontation	Yes <input type="checkbox"/> Fail	No <input type="checkbox"/> Pass
3.3 Bitemporal or homonymous hemianopia	Yes <input type="checkbox"/> Fail	No <input type="checkbox"/> Pass
3.4 <140° horizontal & +/- 45° vertical field	Yes <input type="checkbox"/> Fail	No <input type="checkbox"/> Pass

4. Colour perceptions

4.1 Ishihara	Fail <input type="checkbox"/>	Pass <input type="checkbox"/>
4.2 Other diagnostic colour perception test e.g. D15, D15 saturated, CAD	Fail <input type="checkbox"/>	Pass <input type="checkbox"/>
4.3 Medmont C100 or Oscar colour vision tester	Fail <input type="checkbox"/>	Pass <input type="checkbox"/>
PASS <input type="checkbox"/>		

5. Diplopia and Strabismus

5.1 Diplopia or manifest strabismus present	Yes <input type="checkbox"/> Fail	No <input type="checkbox"/> Pass
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LEVEL 2 ASSESSMENT *only to be completed if history of visual corrective surgery

6. Glare disability

Fail if worse than 6/7.5 (logMAR = 0.1), VAR < 95 in either eye	R.E. 6/ ____ +/- ____ letters L.E. 6/ ____ +/- ____ letters
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7. Dark adaption and night vision

7.1 Any history of familial/retinal disease present	Yes <input type="checkbox"/> Fail	No <input type="checkbox"/> Pass
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8. Contrast sensitivity function

8.1 Low contrast acuity Fail if worse than 6/9 (logMAR = 0.2) VAR<90 in either eye.	Fail <input type="checkbox"/>	Pas <input type="checkbox"/>
8.2 Met edge contrast threshold Fail <17.00db = edge contrast sensitivity of 70 in either eye	Fail <input type="checkbox"/>	Pas <input type="checkbox"/>

9. Outcome of this examination	FAIL <input type="checkbox"/>	PASS <input type="checkbox"/>
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10. Recommendations

Examiner's name

Date

Address (stamp)

Examiner's signature

I consent to this visual examination and the release of the results to:

Medical Recruitment Team
Royal New Zealand Police College
Private Bag 50906
Porirua 5024

Applicant's name

Date

Applicant's signature