Chapter 8
VISUAL IMPAIRMENT

Introduction

This chapter provides criteria for assessing permanent impairment from entitled conditions which result in loss of visual acuity, a visual field defect or other miscellaneous condition(s) of the eye.

Impairment from malignant conditions of the eye is rated within Chapter 18, Malignant Impairment. Follow the steps contained within the Malignant Impairment chapter.

Rating Tables

This chapter contains three “Loss of Function”, one “Other Impairment” table and two figures which may be used to rate entitled visual conditions.

The tables within this chapter are:

Table 8.1	Loss of Function - Visual Acuity	This table is used to rate impairment from loss of visual acuity.
Table 8.2	Loss of Function - Visual Field	This table is used to rate impairment from loss of visual field.
Table 8.3	Loss of Function - Miscellaneous Visual	This table is used to rate impairment from miscellaneous visual conditions.
Table 8.4	Other Impairment - Ocular	This table is used to rate impairment from ocular conditions.
Figure 8A	Esterman Grid - Left Eye	This figure is used to rate impairment from visual field loss in the left eye.
Figure 8B	Esterman Grid - Right Eye	This figure is used to rate impairment from visual field loss in the right eye.

Visual Acuity

Table 8.1 is used to rate impairment from eye conditions which result in a loss of visual acuity.

Visual acuity describes the ability of the eye to perceive details in the environment. Visual acuity is measured for near and distance but for the purposes of **Table 8.1** and for further discussion in this Chapter, visual acuity will refer **only** to best corrected distance acuity. This is measured when wearing glasses or contact lenses, if required. No additional rating is given for wearing corrective lenses.

All visual acuity within the chapter will be expressed in *Snellen Notation* (i.e. 6/6; 20/20). A chart for converting Snellen Notation from metric to standard measurement is found with **Table 8.1**.

Visual acuity at the 20/200 level is sometimes referred to as "*legal blindness"*. This term is a misnomer because ninety percent of persons who are said to be "legally blind" are not totally blind, but have what should be described as *severe vision loss*.

Normal vision is a *binocular* function meaning that both eyes contribute to the function of sight. If an entitled condition affects only one eye the visual impairment is said to be *monocular*. However, for the purposes of assessment in this Table, all visual impairments are expressed in terms of binocular visual impairment by assuming the vision in the non-entitled eye is normal (i.e. 6/6 or 20/20).

Impairment of entitled amblyopia is rated on the best corrected distance visual acuity at service discharge.

A medical impairment of 35 is given for enucleation of the eye. A medical impairment of 26 for the total loss of vision in the eye and a medical impairment of 9 for the loss of the eye.

Visual Field

Table 8.2 is used to rate impairment from eye conditions which result in loss of visual field.

Visual field testing measures the functional ability of the eye to detect objects in the periphery of the visual environment. Visual fields can be affected in entitled conditions such as glaucoma, optic atrophy, retrobulbar neuritis, and retinitis pigmentosa.

Clinically, most field tests are limited to the central 30 degrees of vision as this is the

most important area for diagnostic purposes. For VAC pension/award purposes, this may disadvantage certain Members/Veterans/Clients. Whenever possible, a 60 degree visual field test will be used.

The preferred method for measuring visual field defects is the Esterman Monocular Functional Test. This test determines a result which corresponds to the monocular field loss assessment. Other manual or automated field tests may be used (e.g. Goldman Visual Field Plots, Bjerrum Screen, Allergan Humphrey Computerized Method or Tangent Screen Testing).

- If the field has been defined by a manual method such as a Bjerrum screen with a 5/1000 white target or a Humphrey bowl at 10dB or less, a transparency of the Esterman grid is placed over the map of the visual field. Those dots that fall wholly or partially within the area of field loss are counted, and the number of dots so counted is to be taken as the monocular assessment for the field loss of that eye.

- If the field has been defined by the Humphrey computerized method, a pseudoisopter is drawn to include all dots of intensity of 10dB or less. A transparency of an appropriate Esterman grid is placed over the area and all dots which fall wholly or partially within the area of the visual field loss are counted. The number of dots so counted is the monocular assessment of the field loss of that eye.

- If a Kinetic Goldman Visual Field Test is used, the isopter produced by the III - 4e stimulus is used to determine the visual field loss. Using an appropriate Esterman grid that covers exactly the central 60 degrees of the Goldman Field, count the dots within the area that represents the visual field loss. The number of counted dots is the monocular field loss assessment for that eye.

If a method other than those identified above is used to determine visual field loss, the case will be rated on individual merits.

Loss of Function - Visual Acuity

Table 8.1 is used to rate impairment where the loss of function relates to visual acuity. Only one rating may be selected. If more than one rating is applicable the ratings are **compared** and the **highest** selected.

If more than one condition with visual acuity effects is to be rated from **Table 8.1**, the conditions are bracketed for assessment purposes.

When **both** eyes have an entitled decrease in visual acuity, the monocular visual acuity rating for the **better** eye is plotted on the horizontal axis and the monocular visual acuity rating for the **worse** eye is plotted on the vertical axis of **Table 8.1.** The value at the intersection point is the binocular visual acuity impairment rating.

When only **one** eye has an entitled decrease in visual acuity, the monocular visual acuity rating in that eye is converted to a binocular visual acuity rating using **Table 8.1**. The monocular visual acuity rating for the non-entitled eye is assumed to be normal (i.e. “6/6" or “20/20") even if there is a loss of visual acuity in that eye. This value is plotted along the horizontal axis of **Table 8.1.** The monocular visual acuity rating for the entitled eye is plotted on **Table 8.1** along the vertical axis. The value at the intersection point is the binocular visual acuity impairment rating.

When entitled visual acuity conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

If non-entitled conditions or conditions rated within another chapter/table of the Table of Disabilities are contributing to the overall impairment, then the Partially Contributing Table (PCT) must be applied to arrive at the rating which is due to the entitled condition(s) rated within this table.

Loss of Function - Visual Field

Table 8.2 is used to rate impairment where the loss of function relates to visual field. Only one rating may be selected. If more than one rating is applicable the ratings are **compared** and the **highest** selected.

If more than one condition with visual field effects is to be rated from **Table 8.2**, the conditions are bracketed for assessment purposes.

When **both** eyes have an entitled decrease in visual field, the monocular field loss assessment for the **better** eye is plotted on the horizontal axis and the monocular field loss assessment for the **worse** eye is plotted on the vertical axis of **Table 8.2.** The value at the intersection point is the binocular visual field impairment rating.

When only **one** eye has an entitled decrease in visual field, the monocular field loss assessment for that eye is converted to a binocular visual field rating using **Table 8.2**. The monocular field loss assessment for the non-entitled eye is assumed to be normal (i.e. “0") even if there is a loss of visual field in that eye. This value is plotted along the horizontal axis of **Table 8.2.** The monocular field loss assessment for the entitled eye

is plotted on **Table 8.2** along the vertical axis. The value at the intersection point is the binocular visual field impairment rating.

When entitled visual field conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

If non-entitled conditions or conditions rated within another chapter/table of the Table of Disabilities are contributing to the overall impairment, then the Partially Contributing Table (PCT) must be applied to arrive at the rating which is due to the entitled condition(s) rated within this table.

Loss of Function - Miscellaneous Visual

Table 8.3 is used to rate impairment from miscellaneous eye conditions. Only one rating may be selected for each entitled condition. If more than one rating is applicable for an entitled condition, the ratings are **compared** and the **highest** selected.

When entitled miscellaneous visual conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

If non-entitled conditions or conditions rated within another chapter/table of the Table of Disabilities are contributing to the overall impairment, then the Partially Contributing Table (PCT) must be applied to arrive at the rating which is due to the entitled condition(s) rated within this table.

Other Impairment - Ocular

Table 8.4 is used to rate impairment from ocular conditions. Only one rating may be selected for each entitled condition. If more than one rating is applicable for an entitled condition, the ratings are **compared** and the **highest** selected.

Any impairment for disfigurement caused by enucleation is included in the impairment rating. No additional impairment rating is considered from the Chapter 22, Skin Impairment.

When entitled ocular conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

If non-entitled conditions or conditions rated within another chapter/table of the Table of Disabilities are contributing to the overall impairment, then the Partially Contributing Table (PCT) must be applied to arrive at the rating which is due to the entitled condition(s) rated within this table.

Table 8.1 - Loss of Function - Visual Acuity

When **both** eyes have an entitled decrease in visual acuity, the monocular visual acuity rating for the **better** eye is plotted on the horizontal axis and the monocular visual acuity rating for the **worse** eye is plotted on the vertical axis of **Table 8.1.** The value at the intersection point is the binocular visual acuity impairment rating.

When only **one** eye has an entitled decrease in visual acuity, the monocular visual acuity rating in that eye is converted to a binocular visual acuity rating using **Table 8.1**. The monocular visual acuity rating for the non-entitled eye is assumed to be normal (i.e. “6/6" or “20/20") even if there is a loss of visual acuity in that eye. This value is plotted along the horizontal axis of **Table 8.1.** The monocular visual acuity rating for the entitled eye is plotted on **Table 8.1** along the vertical axis. The value at the intersection point is the binocular visual acuity impairment rating.

Table 8.1 - Loss of Function - Visual Acuity

								Conversion				
Visual Acuity Worse Eye	≥6/6	Nil						**Metric** 6/6 6/9 6/12 6/18 6/24 6/30 6/36 6/48 6/60 3/60 6/120		**Feet** 20/20 20/30 20/40 20/60 20/80 20/100 20/120 20/160 20/200 10/200 20/400		
	≥6/9	Nil	Nil									
	≥6/12	Nil	Nil	Nil								
	≥6/18	4	4	9	13							
	≥6/24	9	9	13	18	26						
	≥6/30	9	13	13	21	26	26					
	≥6/36	13	18	18	26	31	39	43				
	≥6/48	13	18	21	31	39	43	48	52			
	≥6/60	18	18	26	31	48	48	52	52	61		
	≥3/60, 6/120	18	21	26	34	48	48	61	61	71	76	
	Count fingers or less (blind)	26	26	34	43	52	52	61	68	76	85	85
		≥6/6	≥6/9	≥6/12	≥6/18	≥6/24	≥6/30	≥6/36	≥6/48	≥6/60	≥3/60 6/120	**Count fingers or less (blind)**
Visual Acuity Better Eye												

Steps to Determine Visual Acuity Assessment

Step 1: Determine the rating from **Table 8.1** (Loss of Function - Visual Acuity).

- Plot the monocular visual acuity loss for the worse eye along the vertical axis.
- Plot the monocular visual acuity loss for the better eye along the horizontal axis.

The point of intersection of the two axis indicates the binocular visual acuity impairment.

Note: If only one eye is entitled or if only one eye has a visual acuity impairment then the monocular impairment for the second eye is determined to be normal (i.e.6/6 or 20/20) even if there is a loss of visual acuity in that eye.

Step 2: Does the Partially Contributing Table apply? If yes, apply to the rating at Step 1.

Step 3: Determine the Quality of Life rating**.**

Step 4: Add the ratings at Step 2 and Step 3.

Step 5: If partial entitlement exists, apply to the rating at Step 4.

This is the Disability Assessment.

Table 8.2 - Loss of Function - Visual Field

When both eyes have an entitled decrease in visual field, the monocular field loss assessment for the better eye is plotted on the horizontal axis and the monocular field loss assessment for the worse eye is plotted on the vertical axis of Table 8.2. The value at the intersection point is the binocular visual field impairment rating.

When only one eye has an entitled decrease in visual field, the monocular field loss assessment for that eye is converted to a binocular visual field rating using Table 8.2. The monocular field loss assessment for the non-entitled eye is assumed to be normal (i.e. “0") even if there is a loss of visual field in that eye. This value is plotted along the horizontal axis of Table 8.2. The monocular field loss assessment for the entitled eye is plotted on Table 8.2 along the vertical axis. The value at the intersection point is the binocular visual field impairment rating.

Central scotoma is rated on individual merits.

Table 8.2 - Loss of Function - Visual Field

	Loss of Visual Field																					
	0	Nil																				
	5	Nil	4																			
	10	4	4	9																		
	15	4	9	9	13																	
	20	4	9	9	13	18																
	25	4	9	13	13	18	21															
	30	9	9	13	18	18	21	26														
	35	9	13	13	18	21	21	26	31													
	40	9	13	18	18	21	21	26	31	34												
Monocular Field Loss Assessment of Worse Eye	45	9	13	18	18	21	26	26	31	34	34											
	50	9	13	18	21	21	26	31	31	34	39	39										
	55	13	13	18	21	21	26	31	34	34	39	43	43									
	60	13	18	18	21	26	26	31	34	34	39	43	48	48								
	65	18	18	18	21	26	31	31	34	39	39	43	48	52	52							
	70	18	21	18	21	26	31	34	34	39	43	43	48	52	52	57						
	75	21	21	21	26	26	31	34	34	39	43	48	48	52	57	57	63					
	80	21	26	21	26	31	31	34	39	39	43	48	52	52	57	61	63	68				
	85	26	26	26	26	31	34	34	39	43	43	48	52	52	57	61	68	71	76			
	90	26	26	26	26	31	34	34	39	43	48	48	52	57	57	61	68	76	81	85		
	95	26	26	31	31	31	34	39	39	43	48	52	52	57	61	61	68	81	85	85	85	
	100	26	26	31	31	34	34	39	43	43	48	52	52	57	61	63	71	81	85	85	85	85
		0	5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90	95	100
	Monocular Field Loss Assessment of Better Eye																					

Steps to Determine Visual Field Assessment

Step 1: Determine the rating from **Table 8.2** (Loss of Function- Visual Field).

- Plot the monocular visual field loss for the worse eye along the vertical axis.
- Plot the monocular visual field loss for the better eye along the horizontal axis.

The point of intersection of the two axis indicates the binocular visual field impairment.

Note: If only one eye is entitled or if only one eye has a visual field impairment then the monocular impairment for the second eye is determined to be normal (i.e. “0") *even if there is a loss of visual field in that eye*.

Step 2: Does the Partially Contributing Table apply? If **yes**, apply to the rating at Step 1.

Step 3: Determine the Quality of Life rating.

Step 4: Add the ratings at Step 2 and Step 3.

Step 5: If partial entitlement exists, apply to the rating at Step 4.

This is the Disability Assessment.

Table 8.3 - Loss of Function - Miscellaneous

Only one rating may be given for each entitled condition. If more than one rating is applicable for an entitled condition, the ratings are **compared** and the **highest** selected.

Each bullet (•) represents one criterion. In order for a rating to be established, all criteria designated at that rating level must be met.

Table 8.3 - Loss of Function - Miscellaneous

Visual Disturbance Criteria	Rating
Nystagmus without diplopia	**0**
Cataract with no loss of visual acuity	**0**
Glaucoma (unilateral or bilateral) without loss of visual fields	**2**
Bilateral or Unilateral intraocular lens	**0**
Bilateral aphakia	**5**
Unilateral aphakia	**10**
Diplopia* one direction of sideways gaze	**10**
Diplopia* all directions of upward gaze	**10**
Diplopia* all directions of downward gaze	**15**
Diplopia* both directions of sideways gaze	**15**
Diplopia* all directions of gaze	**25**

*** Diplopia in the above table refers to a diplopia that is not fully correctable with prism.**

Table 8.4 - Other Impairment - Ocular

One rating is selected from Table 8.4 for each entitled condition. If more than one rating is applicable, the ratings are **compared** and the **highest** rating is selected as the **Table 8.4** rating.

Each bullet (•) represents one criterion. In order for a rating to be established, all criteria designated at that rating level must be met.

Table 8.4 - Other Impairment - Ocular

Rating	Criteria
Nil	• Occasional conjunctivitis (less than 6 episodes per year); **or** • Pterygium (non-operated).
Two	• Intermittent conjunctivitis (6 or more episodes per year); **or** • Pterygium, reoccurring or needing operative intervention; **or** • Proptosis (exopthalmos) unilateral or bilateral.
Four	• Constant but mild irritation of eyes resulting in symptoms and signs. (e.g. chronic conjunctivitis or blepharoconjunctivitis, persistent photophobia, epiphora); **or** • Disorder resulting in dry eyes necessitating regular, daily use of eye drops (dry eye syndrome); **or** • Uncorrected ectropion or entropion; **or** • Ptosis or tarsorrhaphy resulting in continuous partial closure of eye.
Nine	• Symptoms and signs of severe eye irritation present all the time.

Steps to Determine Miscellaneous Visual and Ocular Assessment

Step 1: Determine the rating from **Table 8.3** (Loss of Function - Miscellaneous).

Step 2: Does the Partially Contributing Table apply? If **yes**, apply to the rating at Step 1.

Step 3: Determine the Quality of Life rating.

Step 4: Add the ratings at Step 2 and Step 3.

Step 5: If partial entitlement exists, apply to the rating at Step 4.

This is the Disability Assessment for miscellaneous conditions of the eye.

Step 6: Determine the rating from **Table 8.4** (Other Impairment - Ocular).

Step 7: Does the Partially Contributing Table apply? If **yes**, apply to the rating at Step 6.

Step 8: Determine the Quality of Life rating.

Step 9: Add the ratings at Step 7 and Step 8.

Step 10: If partial entitlement exists, apply to the rating at Step 9.

This is the Disability Assessment for ocular conditions.

FIGURE 8A - ESTERMAN GRID: LEFT EYE

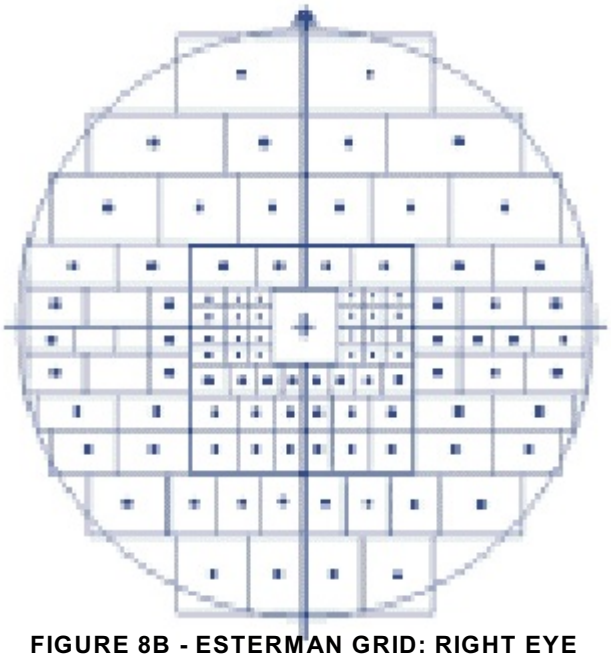

FIGURE 8B - ESTERMAN GRID: RIGHT EYE