

A NEW VERSION OF “SEVEN, FOUR, AND OUT THE DOOR”?

I attended Pacific University College of Optometry in the early 1970s. For a part of the standard examination procedure we were taught the Optometric Extension Program 21 point sequence. Tests were numbered from 1 to 21. For example, number 1 was ophthalmoscopy, 2 was keratometry, 4 was static retinoscopy, 5 and 6 were dynamic retinoscopy, and 7 was subjective refraction. Numbers 8 through 12 were dissociated phorias and fusional vergence ranges at distance. Numbers 13 through 21 involved nearpoint testing – dissociated phorias, fusional vergence ranges, cross cylinder tests, and relative accommodation. We were taught that a complete examination should include the 21 points, plus entrance tests such as visual acuity, cover test, eye movement tests, etc., and ocular health tests, such as intraocular pressure and others as indicated.

While the intervening years have seen significant expansion in optometric knowledge and scope of practice, advances in technology, changes in analytical philosophies, the dropping of such a test numbering system, and many other changes, one’s view of what constitutes a complete examination might not differ too greatly from what was taught four decades ago. In other words, adequate care then and now should involve careful assessment of the entire visual system, including refractive status,

accommodation, binocular vision, visual perception, ocular health, and ocular indicators of systemic health.

A slogan that I recall hearing during school years to represent inadequate patient care was “Seven, Four, and Out the Door,” indicating an examination consisting of only retinoscopy and subjective refraction, substandard care then and now. Some of the procedures on smart phones or similar technologies being touted now as an “examination” appear to be only attempting an evaluation of refractive status. Are these new versions of “Seven, Four, and Out the Door”? What lessons can we learn from our history to assure that adequate care of patients is achieved? It seems to me that knowledge of optometry history will always be a valuable aid to the challenges and changes the profession faces.

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Letter to the Editor

When I opened my new HINDSIGHT, I could not believe how “refreshing” the new look is - terrific job!

Then I turned the first page and what did I see? My ‘mug’ and the announcement of my ‘retirement’ from the Board which was very complimentary, by the way. Thank you. Since I lost my collection of past HINDSIGHTS in a house fire on September 15th, I can begin my new collection with this historic ISSUE.

I shall miss serving and am hopeful that someone younger will take my place, encouraging younger ODs to take a greater interest in Optometry’s past. I do feel that the infusion of younger ODs into our Society will cause us to grow to a level that will enhance the Profession and further preserve our proud history.

Sincerely,

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