



OSCE Checklist: Blind Spot Assessment

Introduction		
1	Wash your hands and don PPE if appropriate	
2	Introduce yourself to the patient including your name and role	
3	Confirm the patient's name and date of birth	
4	Briefly explain what the examination will involve using patient-friendly language	
5	Gain consent to proceed with the examination	
6	Position the patient sitting on a chair	
7	Ask if the patient has any pain before proceeding	
8	Gather appropriate equipment	
Blind spot assessment		
9	Sit opposite the patient at a distance of 1 metre	
10	Ask the patient to cover one eye with their hand	
11	If the patient covers their right eye, you should cover your left eye (mirroring the patient)	
12	Ask the patient to focus on part of your face (e.g. nose) and not move their head or eyes during the assessment. You should do the same and focus your gaze on the patient's face.	
13	Using a red hatpin (or alternatively, a cotton bud stained with fluorescein/pen with a red base) start by identifying and assessing the patient's blind spot in comparison to the size of your own. The red hatpin needs to be positioned at an equal distance between you and the patient for this to work.	
14	Ask the patient to say when the red part of the hatpin disappears, whilst continuing to focus on the same point on your face.	
15	With the red hatpin positioned equidistant between you and the patient, slowly move it laterally until the patient reports the disappearance of the top of the hatpin.	
16	After the hatpin has disappeared for the patient, continue to move it laterally and ask the patient to let you know when they can see it again.	
17	Further assess the superior and inferior borders of the blind spot using the same process.	
To complete the examination...		
18	Explain to the patient that the examination is now finished	
19	Thank the patient for their time	
20	Dispose of PPE appropriately and wash your hands	
21	Summarise your findings	
22	Suggest further assessments and investigations	