



# NOD

**National Ophthalmology  
Database Audit**

## Ocular co-pathology / Known Risk Factor

Eighth year of the prospective National Cataract Audit  
Third year of the National Age-related Macular Degeneration  
Audit

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Document author

Paul HJ Donachie

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## Document Location

The master copy of the document can be found in the RCOphth shared drive

## Version History

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## 1 The RCOphth NOD audit team

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### **RCOphth project clinical leads**

John C Buchan – NOD Cataract Audit Clinical Lead - Consultant Ophthalmologist, Leeds Teaching Hospitals NHS Trust and Associate Professor at the International Centre for Eye Health, LSHTM

Martin McKibbin – NOD AMD Audit Clinical Lead – Consultant Ophthalmologist, Leeds Teaching Hospitals NHS Trust

The Royal College of Ophthalmologists

18 Stephenson Way

London

NW1 2HD

Tel: +44 (0) 20 7935 0702 Fax: +44 (0) 20 7383 5258 Email: [noa.project@rcophth.ac.uk](mailto:noa.project@rcophth.ac.uk)

### **The RCOphth NOD delivery unit:**

Mr Paul Henry John Donachie – RCOphth NOD Senior Medical Statistician

Mable Thankachan Monachan – Medical Statistician

Marta Gruszka-Goh – Medical Statistician

Professor Peter Scanlon – Consultant Ophthalmologist

Gloucestershire Retinal Research Group office

Above Oakley Ward

Cheltenham General Hospital

Gloucestershire

GL53 7AN

Phone: 03004 22 2852

Email: [ghn-tr.nod@nhs.net](mailto:ghn-tr.nod@nhs.net)

## 2 Acknowledgment

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The National Ophthalmology Database (NOD) Audit is conducted under the auspices of the Royal College of Ophthalmologists (RCOphth) and conducts both the annual National Cataract Audit and the National Age-related Macular Degeneration Audit.

We acknowledge the support of the hospitals that are participating in the RCOphth NOD and thank our medical and non-medical colleagues for the considerable time and effort devoted to data collection. All participating centres are listed on the RCOphth NOD website ([www.nodaudit.org.uk](http://www.nodaudit.org.uk)).

We acknowledge with thanks the contribution of Professor John Sparrow who provided diligent clinical and academic oversight and leadership of the NOD over many years to bring it to its current stature.

It is with gratitude that we remember our friend and colleague Robert Johnston, who sadly died in September 2016. Without his inspirational vision, determination and career long commitment to quality improvement in ophthalmology this work would not have been possible.

### 3 Introduction

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The Royal College of Ophthalmologists (RCOphth) is the governing authority for the National Ophthalmology Database Audit (NOD) and conducts both The National Cataract Audit, and The National Age-related Macular Degeneration (AMD) Audit. The National Cataract Audit is open to all providers of cataract surgery in England, Guernsey, Scotland, Northern Ireland and Wales. The National AMD Audit is open to providers of NHS funded Neovascular AMD treatment with anti-vascular endothelial growth factor (Anti-VEGF) injections. The data is collected as part of routine clinical care on electronic medical record (EMR) systems or in-house data collection systems and the analysis is performed by the RCOphth NOD Audit statisticians based in Cheltenham General Hospital.

National Cataract Audit results are reported to the Care Quality Commission, available on the audit website ([www.nodaudit.org.uk](http://www.nodaudit.org.uk)), in annual reports and peer-reviewed publications. At the end of a reporting cycle, aggregated centre level data is uploaded to [www.data.gov.uk](http://www.data.gov.uk) and is accessed by the Getting It Right First Time programme, and hyperlinks to fully qualified surgeons' results on the audit website are provided to the Private Healthcare Information Network. Centre level results include operations performed by trainee surgeons, but publicly available named surgeon results do not.

A major component of case complexity adjustment used in the National Cataract Audit and the National AMD Audit is the recorded ocular co-pathology / known risk factor which can be recorded at the time of cataract surgery, at the time of first Anti-VEGF injection or be inferred from historic records for the patient. This document details the inferring from pre-cataract surgery records, and pre-first Anti-VEGF injection records that applies to the ocular co-pathology / known risk factor data used in RCOphth NOD results.

As the RCOphth NOD receives data collected on multiple systems that can have different ways to record information, the terminology used in this document is the wording used in the supplied information.

The data submission for Open Eyes centres includes a description of the terms allocated to 'unspecified other' ocular co-pathology; these descriptions are checked and the ocular co-pathology changed when for an existing ocular co-pathology, or to 'none' when for a cataract subtype, systemic disease or eye conditions that are not an ocular co-pathology for cataract surgery or AMD treatment.

## 4 Ocular co-pathology / known risk factor

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Ocular co-pathology / known risk factor data at the time of cataract surgery or first Anti-VEGF injection can be inferred from other parts of the medical record.

### General inferring:

- If an eye has records prior to cataract surgery for intra-vitreous injection (IVI) Antivirals or Antifungals, or IVI administration of Steroids or Methotrexate during cataract surgery, then the ocular co-pathology for this eye includes “Uveitis”.
- If the most recent diabetic retinopathy (DR) grading assessment prior to cataract surgery or first Anti-VEGF injection records an eye to have DR then the ocular co-pathology for this eye is DR.
- If there is a pre-cataract surgery or pre-first Anti-VEGF injection axial length measurement of  $\geq 28$  mm then the ocular co-pathology for this eye includes “high myopia”.
- A recorded ocular co-pathology of “vitrectomy” or “retinal detachment” is classified as “Previous vitrectomy”.
- Eligible eyes can have multiple indications for surgery (“cataract” + another indication) and multiple diagnostic records, this data can be used to infer ocular co-pathology.
- A recorded ocular co-pathology of “glaucoma suspect” does not imply the eye has glaucoma. Neither glaucoma suspect nor ocular hypertension are considered as an ocular co-pathology in the cataract or AMD analysis.
- In the absence of data, the RCOphth NOD analyses have to assume that absence of any record of ocular co-pathology data equates to the absence of the ocular co-pathology / known risk factor in the eye.

In the earliest records of cataract surgery held by the RCOphth NOD, Epiretinal Membrane, Macular Hole and Retinal Detachment were recorded as ocular co-pathologies without specifying if with or without a previous vitrectomy surgery. In RCOphth NOD national audits, both Epiretinal Membrane and Macular Hole are included with “Other macular pathology” and Retinal Detachment with “Previous vitrectomy”. For the more recent years, the recording of terms has included the option of specifying with or without a previous vitrectomy surgery.

In RCOphth NOD analyses both Adnexal and Ocular Motility are included with “Unspecified other”. For secondary analyses over a longer time period than an audit year, these conditions can be considered if relevant for the analysis outcome.

Currently in RCOphth NOD analysis results Stickler syndrome is combined with “unspecified other” due to the infrequency or the recording of this condition. Fuchs’s Endothelial Dystrophy is combined with corneal pathology.



## 5 Ocular co-pathology / known risk factor from surgical procedures

From surgical procedure data prior to cataract surgery the following ocular co-pathology / known risk factor can be inferred, Table 1.

**Table 1:** Ocular co-pathology / known risk factors inferred from surgical data for treatment prior to cataract surgery

Recorded surgical procedure	Inferred Ocular co-pathology / known risk factor
Division of Hughes flap	Adnexal
Rebubble of endothelial keratoplasty	Corneal Pathology
Bleb needling Bleb revision Endocyclophotocoagulation Injection of bleb antimetabolite Injection of bleb autologous blood Insertion of any of the following ocular devices <ul style="list-style-type: none"> <li>• Cypass implant</li> <li>• Ex-press implant - r-50</li> <li>• Hydrus microstent</li> <li>• Minijet implant</li> <li>• Stent into baerveldt tube</li> <li>• Stent into preserflo microshunt</li> </ul> Removal of stent from baerveldt tube Revision of tube implant	Glaucoma
Revision of trabeculectomy Trabeculectomy surgery	Glaucoma + Previous trabeculectomy
Advancement of medial rectus muscle of eye Anterior transposition of inferior oblique muscle of eye	Ocular Motility
Amniotic membrane graft to macular	Other Macular Pathology + Previous vitrectomy
Lasek Lasik Laser-Assisted in Situ Keratomileusis Laser refractive keratectomy Epi-LASIK PRK	Previous Laser Refractive Surgery
Pneumatic retinopexy	Previous Retinal Detachment Surgery
Pars plana vitrectomy	Previous Vitrectomy Surgery

If any of the following surgical procedures are recorded prior to cataract surgery or performed during cataract surgery, then the Ocular Co-pathology inferred is “Corneal Pathology”.

- Amniotic membrane transplant to cornea
- Anterior lamellar keratoplasty
- Biopsy of lesion of cornea
- Cautey of lesion of cornea
- Chelation of cornea
- Cleaning of corneal flap
- Conductive keratoplasty
- Corneal collagen cross-linking
- Corneal epithelial debridement
- Corneal gluing
- Corneal limbal cell transplant
- Corneal scrape
- Cryotherapy to lesion of cornea
- Debridement of lesion of cornea
- Deep lamellar keratoplasty
- Destruction of lesion of cornea
- Excision of lesion of cornea
- Exploration of cornea
- Incisional keratectomy
- Insertion of INTACS
- Intracorneal insertion of lens
- Laser thermal keratoplasty
- Limbal relaxing incisions / astigmatic keratotomy
- Magnetic extraction of cornea foreign body
- Other cornea operation
- Penetrating keratoplasty
- Phototherapeutic keratectomy
- Posterior endothelial keratoplasty
- Pterygium excision

- Removal of corneal foreign body
- Removal of corneal rust ring
- Removal of INTACS
- Revision of corneal flap
- Section of cornea
- Superficial keratectomy
- Surgical removal of cornea foreign body
- Tattooing of cornea
- Trepine of cornea

## 6 Ocular co-pathology / known risk factor from postoperative complications

From postoperative complications recorded for treatment prior to cataract surgery the following ocular co-pathology / known risk factor can be inferred, Table 2.

**Table 2:** Ocular co-pathology / known risk factor inferred from pre-cataract treatment postoperative complication data

Recorded postoperative complication	Inferred Ocular co-pathology / known risk factor
Post-operative ptosis	Adnexal
Corneal decompensation Corneal epithelial defect Corneal epithelial staining Corneal graft rejection Corneal haze Corneal melt Corneal oedema / striae / descemet's folds Corneal scarring Dry cornea Infective corneal infiltrate Punctate keratitis Recurrent corneal erosion syndrome Sterile corneal infiltrate Suture induced corneal abscess	Corneal Pathology
Onset or progression of diabetic maculopathy (within 6 months of operation) Progression of diabetic retinopathy	Diabetic Retinopathy
Angle closure glaucoma Malignant glaucoma Tube misdirection Tube touching cornea Tube touching iris	Glaucoma
Epiretinal membrane	Epiretinal Membrane
Macular hole	Macular Hole
Cystoid macular oedema	Other Macular Pathology
Posterior synechiae	Posterior synechiae
Exposed scleral buckle Heavy liquid in the anterior chamber Retinal Detachment Silicone oil filling anterior chamber	Previous Retinal Detachment Surgery

Heavy liquid in the anterior chamber Silicone oil filling anterior chamber	Previous Vitrectomy Surgery
Anterior uveitis Post-operative uveitis Scleritis	Uveitis
Vitreous haemorrhage	Vitreous Opacities

## 7 Rhegmatogenous retinal detachment as an ocular co-pathology / known risk factor

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In the National Cataract Audit the different forms of retinal detachment (RD) can be separated with the focus on rhegmatogenous RD than exudative or tractional RD as an ocular co-pathology / known risk factor.

Rhegmatogenous RD (RRD) is identified from different stages of the patient pathway, as not all centres submit data for every assessment from all areas of the hospital eye service where data could be recorded for RRD. Depending on the implementation of the EMR across a hospital's eye service, diagnoses of RRD could be recorded without the data for the surgery, or vice versa, or RRD could only be recorded as a postoperative complication.

To identify RRD the relevant parts of data are;

- Postoperative complication data
- Diagnostic data (diagnosis and indication for surgery)
- Surgery data

Once all possible records are processed, the RRD data can be matched to the cataract surgery data to identify pre-cataract and post-cataract RRD.

### **Postoperative complication data:**

RRD is identified from a postoperative complication records of retinal detachment

### **Diagnostic data (diagnosis and indication for surgery):**

Diagnosis / Indication for surgery data is used to identify definite RRD, possible RRD and exudative or tractional RD. The same approach is used for both diagnosis data and indication for surgery data as there is a common coding structure on the RCOphth NOD for these two parts of clinical data. The clinical terms listed below uses the internal RCOphth NOD coded labelling.

### **Definite RRD diagnoses / indication for surgery;**

- 1 quadrant of retina detached
- 2 quadrants of retina detached
- 3 quadrants of retina detached
- 4 quadrants of retina detached
- Chronic rhegmatogenous retinal detachment
- Chronic rhegmatogenous retinal detachment - macula off
- Chronic rhegmatogenous retinal detachment - macula on
- Largest tractional tear < 1 clock hour
- Largest tractional tear > 1 clock hour
- Retinal detachment
- Retinal detachment associated with myopia
- Rhegmatogenous retinal detachment
- Rhegmatogenous retinal detachment - macula off
- Rhegmatogenous retinal detachment - macula on
- Rhegmatogenous retinal detachment associated with myopia
- Rhegmatogenous retinal detachment (primary)
- Rhegmatogenous retinal detachment (1 previous operation for RD)
- Rhegmatogenous retinal detachment (2 previous operations for RD)
- Rhegmatogenous retinal detachment (> 2 previous operations for RD)
- Tractional (horse-shoe) tear

### **Possible RRD diagnoses / indication for surgery;**

- Cause of failed retinal detachment surgery unknown
- Cryo / buckle retinal detachment repair
- Largest retinal break 0.5 clock hours
- Largest retinal break 1 clock hour
- Largest retinal break 2 clock hours
- Largest retinal break 3 clock hours
- Largest retinal break 4 clock hours
- Largest retinal break 5 clock hours
- Largest retinal break 6 clock hours
- Largest retinal break 7 clock hours
- Largest retinal break 8 clock hours
- Largest retinal break 9 clock hours
- Largest retinal break 10 clock hours
- Largest retinal break 11 clock hours
- Largest retinal break 12 clock hours
- Low buckle indent
- No visible buckle indent
- PVR caused failed retinal detachment surgery
- PVR grade A
- PVR grade B
- PVR grade C
- PVR grade CA1
- PVR grade CA2
- PVR grade CA3
- PVR grade CA4
- PVR grade CA5
- PVR grade CA6
- PVR grade CA7
- PVR grade CA8
- PVR grade CA9
- PVR grade CA10

- PVR grade CA12
- PVR grade CP1
- PVR grade CP12
- PVR grade CP2
- PVR grade CP3
- PVR grade CP4
- PVR grade CP5
- PVR grade CP6
- PVR grade CP7
- PVR grade CP8
- PVR grade CP9
- PVR grade CP10
- PVR grade CP11
- Secondary open angle glaucoma (retinal detachment)
- Serous retinal detachment
- Successfully treated retinal detachment
- Treated retinal break re-opening caused failed retinal detachment surgery
- Untreated retinal break caused failed retinal detachment surgery
- Unsuccessfully treated retinal detachment
- Vitrectomy retinal detachment repair

**Exudative or Tractional RD diagnoses / indication for surgery;**

- Combined tractional/rhegmatogenous retinal detachment associated with diabetic retinopathy
- Exudative retinal detachment
- Exudative retinal detachment associated with age-related macular degeneration
- Macula off tractional retinal detachment associated with diabetic retinopathy
- Macula on tractional retinal detachment associated with diabetic retinopathy
- Proliferative sickle cell retinopathy stage V (tractional retinal detachment)
- Tractional retinal detachment
- Tractional retinal detachment associated with diabetic retinopathy
- Tractional retinal detachment associated with diabetic retinopathy - fovea detached



- Tractional retinal detachment associated with diabetic retinopathy - fovea not threatened
- Tractional retinal detachment associated with diabetic retinopathy - traction on fovea

For eyes with data for >1 of the groups on the same date, the following allocation order applies;

- Definite RRD supersedes possible RRD
- Exudative or Tractional RD supersedes either definite RRD and possible RRD

This reduces the diagnostic information to one of the groups for each date the eye has this data recorded for.

### Surgical procedures data:

Surgery procedure data is used to identify definite RRD surgery and possible RRD surgery by first creating binary variables from the surgical procedure data and then applying a hierarchical allocation. The binary variables created are displayed in Table 3;

**Table 3:** Binary variable created from surgical procedures data

Surgical procedures terminology on NOD	Binary variable
Scleral buckle – circumferential Scleral buckle – encircling Scleral buckle - radial	Buckle
Pars plana vitrectomy	PPV
Internal tamponade – air Internal tamponade - c2f6 gas Internal tamponade - c3f8 gas Internal tamponade - sf6 gas Internal tamponade - heavy liquid Internal tamponade - heavy silicone oil (densiron) Internal tamponade - silicone oil	Tamponade
Retinopexy – endolaser Retinopexy - 360-degree laser Retinopexy - indirect laser Retinopexy – cryotherapy Cryotherapy to lesion of retina Retinopexy - trans-scleral diode laser Retinopexy - other	Laser

PVR membrane peel	PVR peeling
Drainage of subretinal fluid through retina Retinotomy – drainage Retinectomy Retinotomy – relieving Drainage of subretinal fluid through sclera Drainage of supra-choroidal haemorrhage	Drainage
Automated anterior vitrectomy Sponge and scissors vitrectomy	Other Vitrectomy
Pneumatic retinopexy	Pneumatic
Scleral buckle – removal Scleral buckle - revision / replacement Removal of silicone oil Removal of tamponading agent	Removal
Fibrovascular membrane delamination Fibrovascular membrane segmentation	Fibrovascular
Epiretinal membrane peel	ERM peeling
Internal limiting membrane peel	ILM peeling
Subretinal membrane / band removal	Other

Using the binary variables detailed in Table 3, each eye is allocated in the specified order below to either definite RRD surgery or possible RRD surgery, and during this allocation point, once allocated their status does not change. Only the binary variables listed for each allocation are used, if a binary variable is not listed, then this is when this is not listed (variable = 0), for example if Laser is not listed, then the relevant row in the allocation is when no laser was recorded.

The structure below uses the name allocated to the binary variable outlined in Table 3.

**Not RRD surgery;**

- Eyes where all binary variables = 0
- Eyes with only Other Vitrectomy
- Eyes with no Buckle or PPV ± Other Vitrectomy
- Eyes with only PPV + Removal
- Eyes with PPV with no laser and no tamponade
- Eyes with only PPV + Tamponade + ERM peeling

- Eyes with only PPV + Tamponade + ILM peeling
- Eyes with only PPV + Tamponade + ERM peeling + ILM peeling
- Eyes with Fibrovascular

#### **Definite RRD surgery;**

- Eyes with Buckle
- Eyes with Pneumatic
- Eyes with PPV + Tamponade + Laser ± Drainage ± PVR peeling ± Removal ± ERM peeling ± ILM peeling ± Other Vitrectomy ± Other
- Eyes with PPV + Tamponade + PVR peeling ± Drainage ± Removal ± Other Vitrectomy ± Other
- Eyes with PPV + Tamponade + Drainage ± PVR peeling Removal ± Other Vitrectomy ± Other
- Eyes with PPV + Tamponade + Removal ± PVR peeling ± Drainage ± Other Vitrectomy ± Other
- Eyes with PPV + Laser + PVR peeling ± Drainage ± Removal ± Other Vitrectomy ± Other
- Eyes with PPV + Laser + Drainage ± PVR peeling ± Removal ± Other Vitrectomy ± Other
- Eyes with PPV + Laser + Removal ± PVR peeling ± Drainage ± Other Vitrectomy ± Other
- Eyes with Gas Tamponade + Retinopexy without PPV

#### **Possible RRD surgery;**

- Eyes with PPV + Tamponade + ERM peeling + (any of drainage, PVR peel, Removal, Other Vitrectomy or Other)
- Eyes with PPV + Tamponade + ILM peeling + (any of drainage, PVR peel, Removal, Other Vitrectomy or Other)
- Eyes with PPV + Tamponade + ERM peeling + ILM peeling + (any of drainage, PVR peel, Removal, Other Vitrectomy or Other)
- Eyes with PPV + Laser + ERM peeling + (any of drainage, PVR peel, Removal, Other Vitrectomy or Other)
- Eyes with PPV + Laser + ILM peeling + (any of drainage, PVR peel, Removal, Other Vitrectomy or Other)

- Eyes with PPV + Laser + ERM peeling + ILM peeling + (any of drainage, PVR peel, Removal, Other Vitrectomy or Other)
- Eyes with PPV + Laser + ERM peeling only ± removal
- Eyes with PPV + Laser + ILM peeling only ± removal
- Eyes with PPV + Laser + ERM peeling + ILM peeling only ± removal
- Eyes with PPV + Tamponade + Other Vitrectomy only
- Eyes with PPV + Laser + Other Vitrectomy only
- Eyes with PPV + Tamponade + Other only
- Eyes with PPV + Laser + Other only
- Eyes with PPV + Tamponade only
- Eyes with PPV + Laser only

**Combining data sources for final identification:**

**Allocation when dates match:**

When the diagnostic and surgical data is recorded on the same date, definite RRD from either source allocates this episode to be RRD.

When the postoperative complication record is recorded for the same date as a diagnostic record for possible RRD, this episode is allocated as RRD.

**Allocation when dates are within a plausible time period that could be for the same RRD episode:**

When the diagnostic record is recorded within two weeks prior to the surgical record, these records are assumed to be for the same RRD episode, to account for diagnosis on one day with listing and surgery on another day. Similarly, when the diagnostic record is up to 7 days after the surgery record, to account for ‘soon after’ data entry, amendment or reviewing of recorded data.

When the diagnostic or surgical record is recorded within two weeks after the postoperative complication record, these records are assumed to be for the same RRD episode with the

diagnosis and/or surgery data assumed to be for dealing with the RRD as a postoperative complication of an earlier surgery.

In these situations, definite RRD from any source allocates this episode to be RRD.

### **Allocation with dates do not match or are outside of plausible same event time period**

When the records do not match on dates or are outside of the plausible time period for the same RRD episode, then postoperative complication records of RRD, diagnostic and surgical records of definite RRD allocate the episode to be RRD, while records for possible RRD allocate the episode to not RRD.

## **8 Indications for surgery and diagnostic records that can imply the presence of an ocular co-pathology / known risk factor**

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The following terms can be recorded on the contributing EMR systems as either a diagnosis or an indication for surgery. The RCOphth NOD uses the recording of this information to infer the ocular co-pathology / known risk factor as described below using the records prior to cataract surgery or first Anti-VEGF injection. All wording is as in the information that has been supplied to the RCOphth NOD.

### **Adnexal**

- Abscess of lower eyelid
- Absent nasolacrimal duct
- Absent nasolacrimal duct causing nasolacrimal duct obstruction
- Acquired blepharophimosis
- Actinic keratosis of lower eyelid
- Active thyroid eye disease
- Acute follicular conjunctivitis
- Acute lacrimal canaliculitis
- Acute mastoiditis with facial paralysis

- Acquired ankyloblepharon
- Adenocystic lacrimal gland carcinoma
- Ankyloblepharon
- Apocrine hydrocystoma of lower eyelid
- Apraxia of eyelid
- Arteriovenous abnormality of orbit
- Atopic dermatitis of eyelid
- Atresia of nasolacrimal duct
- Basal cell carcinoma – adenoid
- Bowen’s disease of eyelid
- Blepharitis
- Bulbar conjunctival degeneration
- Canaliculitis causing nasolacrimal duct obstruction
- Canthus lesion
- Capillary haemangioma of lower eyelid
- Carcinoma in situ of nasolacrimal duct
- Cellulitis of periorbital region
- Chalazion of lower eyelid
- Chalazion of upper eyelid
- Chemical injury to conjunctiva
- Chronic dacryocystitis with fistula formation
- Chronic enlargement of lacrimal gland
- Chronic inflammation of lacrimal passages
- Chronic lacrimal canaliculitis
- Chronic orbital myositis
- Cicatricial blepharophimosis
- Cicatricial ectropion of lower eyelid
- Cicatricial entropion of upper eyelid
- Ciliated lacrimal caruncle
- Complete obstruction of nasolacrimal duct
- Congenital abnormality of lacrimal drainage system
- Congenital absence of lacrimal drainage system

- Congenital anomalies of eyelid, lacrimal system and orbit
- Congenital conjunctival cyst
- Congenital disorder of facial nerve
- Congenital distichiasis
- Congenital ectropion
- Congenital exophthalmos
- Congenital facial nerve palsy
- Congenital nasolacrimal duct obstruction
- Congenital obstruction of lacrimal canal
- Congenital vascular malformation of orbit
- Congenitally small punctum lacrimale
- Conjunctival amyloidosis
- Conjunctival cicatrisation
- Conjunctival chemical injury
- Conjunctival follicles
- Conjunctival foreign body
- Conjunctival inclusion cyst
- Conjunctival lymphangiectasis
- Conjunctival lesion
- Conjunctival melanocytic melanoma
- Conjunctival oedema
- Conjunctival xerosis
- Cyst of lacrimal passages
- Cyst of Zeis – lower eyelid
- Cysticercosis of eye
- Dacryocystitis
- Dacryocystitis with fistula of eyelid
- Dacryolithiasis causing nasolacrimal duct obstruction
- Deformity of orbit
- Disorder of eyelid
- Disorder of lacrimal gland
- Disorder of lacrimal system

- Disorder of nasolacrimal duct
- Disorder of orbit proper
- Distichiasis
- Drug related punctal stenosis causing lacrimal obstruction
- Drug related punctal stenosis causing nasolacrimal duct obstruction
- Dysgenesis of lacrimal punctum
- Entropion – ectropion combination
- Epidermal inclusion cyst of eyelid (disorder)
- Euryblepharon
- Exophthalmos (Thyroid Eye Disease)
- Exophthalmos due to orbital haemorrhage
- Exophthalmos due to lateral displacement of globe
- Exophthalmos due to orbital oedema or congestion
- External hordeolum
- Eyelid sebaceous cyst
- Facial nerve palsy
- Fibrous dysplasia of bone
- Fibrous dysplasia of orbit
- Fistula of upper canaliculus
- Foreign body in conjunctival sac
- Functional nasolacrimal duct obstruction
- Giant keratoacanthoma
- Granuloma of upper eyelid
- Graves's disease
- Haemangioma of eyelid
- Haematoma of eyelid
- Herpes zoster dermatitis of upper eyelid
- Hordeolum
- Hordeolum externum of left eyelid
- Idiopathic nasolacrimal duct obstruction
- Idiopathic orbital inflammation
- Idiopathic punctal stenosis causing lacrimal obstruction



- Idiopathic punctal stenosis causing nasolacrimal duct obstruction
- Imperforate lacrimal punctum
- Insufficiency of lacrimal sac
- Internal hordeolum
- Laceration of eyelid involving lacrimal passages
- Lacrimal and paratoid gland sarcoidosis
- Lacrimal canaliculus inflamed
- Lacrimal cyst
- Lacrimal ductal cyst (dacryops)
- Lacrimal fistula
- Lacrimal gland atrophy
- Lacrimal gland pleomorphic adenoma
- Lacrimal gland swelling
- Lacrimal mucocoele
- Lacrimal sac granuloma
- Lacrimal trauma
- Lagophthalmos
- Lesion of lower eyelid
- Lesion of upper eyelid
- Limbal dermoid of conjunctiva
- Lipid tear deficiency
- Lipoma of eyelid
- Lower and upper nasolacrimal ducts patent
- Lower nasolacrimal duct freely patent
- Lymphangioma of orbit
- Lymphomas of the conjunctiva / caruncle
- Malignant mixed lacrimal gland tumour
- Malignant neoplasm of eye
- Malignant neoplasm of lower eyelid
- Malignant neoplasm of orbital bone
- Malposition of lashes
- Marginal blepharitis

- Medial ectropion
- Meibomianitis
- Melanoma in situ of eyelid, including canthus
- Microcystic adnexal carcinoma
- Mucosa associated lymphoid tissue (MALT) lymphoma of orbit
- Multiple skin tags of eyelids
- Myopathy due to Sjogren's disease
- Naevus of lower eyelid
- Nasolacrimal duct obstruction
- Nasolacrimal duct obstruction due to dacryocoele
- Nasolacrimal duct obstruction due to dacryocystitis with abscess
- Nasolacrimal duct obstruction secondary to herpetic disease
- Nasolacrimal duct obstruction secondary to sarcoidosis
- Nasolacrimal duct patent
- Nasolacrimal duct trauma
- Neonatal obstruction of nasolacrimal duct
- Neoplasm of ocular adnexa
- Neoplasm of skin of eyebrow
- Neoplasm of uncertain behaviour of lacrimal gland
- Neurofibroma of orbit
- Open fracture of orbital portion of zygomatic bone
- Orbital amyloid
- Orbital bone tumour
- Orbital cellulitis
- Orbital congestion
- Orbital dystopia
- Orbital fibrous histiocytoma
- Orbital granuloma
- Orbital inflammatory disease secondary to sarcoidosis
- Orbital ischaemic syndrome
- Other benign tumour of the conjunctiva / caruncle
- Partial nasolacrimal duct obstruction

- Pemphigoid - drug related conjunctival cicatrisation
- Pemphigoid - idiopathic conjunctival cicatrisation
- Pemphigoid - Stevens-Johnson conjunctival cicatrisation
- Pemphigoid - trachomatous conjunctival cicatrisation
- Pemphigoid cicatrisation of the conjunctiva
- Periorbital oedema
- Pinguecula
- Pingueculae
- Pingueculum
- Primary malignant neoplasm of conjunctiva
- Prolapse of lacrimal gland
- Ptosis
- Punctal ectropion of lower eyelid
- Punctal stenosis causing lacrimal obstruction
- Punctal stenosis causing nasolacrimal duct obstruction
- Reflex blepharospasm
- Retrobulbar haemorrhage
- Rhabdomyosarcoma of orbit
- Secondary drug related nasolacrimal duct obstruction
- Secondary malignant neoplasm of orbit
- Senile entropion of lower eyelid
- Seventh nerve palsy
- Sjogren orbital inflammation
- Sjogren syndrome
- Squamous blepharitis
- Stenosis and insufficiency of lacrimal passages
- Stenosis of lacrimal punctum of lower eyelid
- Stenosis of lacrimal sac
- Stenosis of lacrimal system
- Stye
- Sub-tarsal lesion
- Sub-tarsal lump

- Subconjunctival haemorrhage
- Subperiosteal haematoma
- Supranuclear facial nerve palsy
- Suspicious lesion of the conjunctiva
- Suspicious lesion of the eyelid
- Suture granuloma of conjunctiva
- Symblephara
- Symblepharon to lid
- Syringing lower: complete obstruction of nasolacrimal duct
- Syringing upper: complete obstruction of nasolacrimal duct
- Trauma related nasolacrimal duct obstruction
- Trichiasis
- Trichiasis of upper eyelid
- Tumour related nasolacrimal duct obstruction
- Uncomplicated ptosis
- Upper eyelid laceration without lid margin involvement
- Upper nasolacrimal duct freely patent
- Vascular anomaly of eyelid
- Wegener related nasolacrimal duct obstruction
- Wound of ocular adnexa

### **Age-related macular degeneration (AMD)**

- < 50 % of lesion is CNV
- >50 % of lesion is CNV
- $\geq 2$  disc areas of geographic atrophy
- 1 disc area of geographic atrophy
- 1-2 disc areas of geographic atrophy
- 1/2 disc area of geographic atrophy
- Age-related macular degeneration
- Age-related macular degeneration - non-confluent atrophy
- Age-related macular degeneration - peripapillary choroidal neovascular membrane

- Age-related macular degeneration with hard drusen
- Age-related macular degeneration with soft drusen
- Age-related macular degeneration with subretinal fluid / exudate / blood
- Atrophic macular change
- Basal laminar drusen
- Classic choroidal neovascular membrane
- Clinically avascular (serous) PED
- Clinically avascular PED
- CNV (type not specified)
- CNV outside posterior pole
- Cuticular drusen
- Degenerative drusen
- Disciform scar
- Dominant basal laminar drusen
- Dominant drusen
- Drusen
- Drusen stage macular degeneration
- Drusenoid PED
- Dry age-related macular degeneration
- Early AMD
- End stage macular
- Extrafoveal CNV
- Extramacular choroidal neovascular membrane
- Extramacular drusen
- Exudative age-related macular degeneration
- Exudative retinal detachment associated with age-related macular degeneration
- Few drusen
- Fibrovascular PED
- Focal macular hyperpigmentation
- Focal macular hypopigmentation
- Foveal intraretinal haemorrhage
- Foveal involving atrophy

- Foveal sub RPE haemorrhage
- Foveal subretinal haemorrhage
- Geographic atrophy
- Haemorrhagic detachment of retinal pigment epithelium
- Haemorrhagic PED
- Intermediate age related macular degeneration
- Juxtafoveal CNV
- Large drusen
- Macular diffuse atrophy
- Macular drusen
- Macular pigment epithelial rip
- Macular disciform scar
- Medium drusen
- Multifocal CNV
- Neovascular age-related macular degeneration (mixed classic and occult CNV)
- Neovascular age-related macular degeneration (type 3 CNV - RAP lesion)
- Neovascular AMD (classic no occult CNV)
- Neovascular AMD (idiopathic polypoidal choroidal vasculopathy)
- Neovascular AMD (minimally classic CNV)
- Neovascular AMD (occult no classic CNV)
- Neovascular AMD (predominantly classic CNV)
- Neovascular AMD (retinal angiomatous proliferation)
- Neovascular AMD (subtype not specified)
- Nodular drusen
- Non-exudative age-related macular degeneration
- Non-foveal involving atrophy
- Non-geographic atrophy
- Numerous drusen
- Occult choroidal neovascular membrane
- Occult neovascularisation of macular
- PED
- Peripapillary choroidal neovascular membrane

- Peripapillary CNV
- Peripheral CNV
- Peripheral drusen
- Prior treatment for CNV secondary to AMD
- Reticular pseudodrusen
- Reticular retinal degeneration
- Retinal angiomatous proliferation
- Retinal Pigment Epithelial detachment with vascularisation
- Retinal Pigment Epithelial rip / tear
- Senile reticular retinal degeneration
- Small / hard drusen
- Sub RPE haemorrhage
- Sub-foveal CNV
- Subretinal choroidal neovascular membrane
- Suspected neovascular AMD
- Turbid PED
- Vascularised (notched) PED
- Vitreous haemorrhage secondary to age-related macular degeneration
- Wet age-related macular degeneration
- Widespread retinal pigment epithelium (RPE) atrophy

## **Amblyopia**

- Amblyopia
- Amblyopia ex anopsia
- Ametropic amblyopia
- Anisometropic amblyopia
- Functional amblyopia
- Meridional amblyopia
- Occlusion for amblyopia
- Refractive amblyopia
- Stimulus deprivation amblyopia
- Strabismic amblyopia

### **Brunescent / white cataract**

- Brunescent cataract
- Hypermature cataract
- Mature / white cataract

### **Corneal pathology**

- Acquired keratoglobus
- Adenoviral keratitis
- Alkaline chemical burn of cornea and/or conjunctival sac
- Alkaline chemical burn of cornea and conjunctival sac
- Amiodarone induced corneal epithelial deposit
- Anaesthetic cornea
- Anterior crocodile shagreen of cornea
- Anterior staphyloma
- Attached endothelial graft
- Atopic keratoconjunctivitis
- Avellino corneal dystrophy
- Axenfield-Rieger syndrome
- Band-shaped keratopathy
- Bowen's disease of cornea
- Bullous keratopathy
- Calcareous degeneration of cornea
- Calcific band keratopathy
- Carcinoma in situ of cornea
- Central axis band keratopathy
- Central cloudy dystrophy of Francois
- Central corneal ulcer
- Central opacity of cornea
- Central pterygium
- Chemical injury to cornea



- Chemical keratitis
- Clouding of corneal stroma
- Cogan's syndrome
- Complication of refractive keratoplasty by laser surgery
- Congenital corneal opacity
- Congenital hereditary endothelial dystrophy
- Congenital keratoconus
- Congenital keratoconus posticus circumscriptus
- Congenital hereditary endothelial dystrophy
- Congenital macular corneal dystrophy
- Congenital sclerocornea
- Cornea plana
- Corneal abnormal
- Corneal abscess
- Corneal allograft rejection
- Corneal anomaly
- Corneal calcification
- Corneal chemical injury
- Corneal congenital anomaly
- Corneal decompensation
- Corneal degenerations
- Corneal deformity
- Corneal deposit
- Corneal dystrophy
- Corneal endothelial allograft rejection
- Corneal endothelial dystrophy
- Corneal endothelial wound
- Corneal endotheliolitis
- Corneal epithelial allograft rejection
- Corneal epithelial degeneration
- Corneal epithelial defect
- Corneal epithelial dystrophy

- Corneal epithelial ingrowth
- Corneal epithelial wound
- Corneal erosion
- Corneal facet
- Corneal flap fold
- Corneal flap macrostriae
- Corneal ghost vessels (finding)
- Corneal graft
- Corneal graft astigmatism
- Corneal graft disorder
- Corneal graft failure
- Corneal graft infection
- Corneal graft, loose or broken suture
- Corneal graft rejection
- Corneal graft vascularisation
- Corneal haze due to herpes simplex
- Corneal herpetic disease
- Corneal incision leaking
- Corneal infection
- Corneal intraepithelial neoplasia
- Corneal iron deposits
- Corneal keloid
- Corneal laceration
- Corneal lesion
- Corneal leukoma interfering with central vision
- Corneal macular interfering with central vision
- Corneal melting disorder
- Corneal melt / keratolysis
- Corneal nebula
- Corneal neoplasia
- Corneal neovascularisation
- Corneal non-healing epithelial ulcer

- Corneal oedema
- Corneal opacity
- Corneal pannus
- Corneal pathology
- Corneal perforation
- Corneal pigmentations and deposits
- Corneal rust ring
- Corneal scarring
- Corneal scars and opacity
- Corneal stroma striae
- Corneal stromal abscess
- Corneal stromal opacities (finding)
- Corneal stromal wound
- Corneal thinning
- Corneal trauma
- Corneal ulcer
- Corneal ulceration/thinning associated with collagen vascular disease
- Corneal vascularisation
- Corneal verticillata
- Corneal verticillata due to chloroquine
- Corneal warpage
- Corneal wound burn
- Contact lens related corneal infiltrate
- Crocodile shagreen degeneration of the cornea
- Crystalline corneal dystrophy
- Curvature hypermetropia
- Cystinosis corneal crystals
- Decentred corneal stroma ablation
- Decompensated cornea
- Deep vascularisation of cornea
- Degenerative disorder of sclera
- Dendriform epithelial keratoconjunctivitis

- Dendritic ulcer
- Dermoid cyst or cornea
- Descemetocoele
- Descemet's folds
- Descemet's membrane endothelial keratoplasty
- Descemet's stripping endothelial keratoplasty
- Diffuse interstitial keratitis
- Diffuse lamellar keratitis
- Disciform keratitis
- Disorder of cornea
- Drug induced cicatricial pemphigoid
- Drug induced disorder of cornea
- Drug induced keratoconjunctivitis
- Dystrophic corneal ulcer
- Dystrophy of anterior cornea
- Dry cornea (finding)
- Epithelial downgrowth onto iris
- Epithelial recurrent erosion dystrophy of cornea (disorder)
- Fine corneal oedema
- Flap loss
- Fleck corneal dystrophy
- Focal stromal keratitis
- Forme fruste keratoconus
- Fungal keratitis
- Gelatinous droplike corneal dystrophy
- Grade 1 corneal haze post surface laser treatment
- Grade 1 diffuse lamellar keratitis
- Grade 2 corneal haze post surface laser treatment
- Grade 4 corneal haze post surface laser treatment
- Granular corneal dystrophy
- Granulomatous keratitis
- Gross corneal pannus > 2 mm

- Epithelial corneal oedema
- Epithelial downgrowth
- Epithelial downgrowth onto iris
- Focal marginal corneal ulcer
- Fungal infection of eye
- Hazy cornea
- Herpes simplex conjunctivitis
- Herpes simplex corneal endotheliitis
- Herpes simplex disciform keratitis
- Herpes simplex keratitis
- Herpes simplex keratoconjunctivitis
- Herpes simplex keratouveitis
- Herpes simplex necrotising stromal keratitis
- Herpes simplex subepithelial infiltrates
- Herpes simplex virus epithelial keratitis
- Herpes zoster corneal endotheliosis
- Herpes zoster interstitial keratitis
- Herpes zoster keratitis
- Herpes zoster keratoconjunctivitis
- Herpes zoster pseudodendrites
- High astigmatism (disorder)
- Hypertrophy of corneal epithelium
- Hypopyon ulcer
- Idiopathic corneal oedema
- Infected corneal abrasion
- Infectious crystalline keratopathy
- Infectious keratitis
- Infective corneal ulcer
- Infiltrate of cornea
- Intercalary staphyloma
- Interstitial keratitis
- Irido-corneo-endothelial syndrome

- Irido-corneo dysgenesis
- Keratitis
- Keratoconjunctivitis
- keratoconjunctivitis sicca
- Keratoconjunctivitis due to graft-versus-host disease
- Keratoconjunctivitis sicca, (excluding Sjogren syndrome)
- Keratoconjunctivitis sicca, in Sjogren syndrome
- Keartoconjunctivitis sicca, not specified as Sjogrens
- Keratoconus
- Keratoglobus
- Keratopathy due to corneal stem cell failure
- Labrador keratopathy
- Lattice corneal dystrophy type 1
- Lattice corneal dystrophy type 2
- Lattice corneal dystrophy, isolated form
- Limbal dermoid of cornea
- Limbal stem cell deficiency
- Lipid keratopathy
- Lipodermoid of cornea
- Loose suture of corneal graft
- Map-dot-fingerprint corneal epithelial dystrophy
- Marginal corneal infiltrate associated with blepharoconjunctivitis
- Marginal corneal ulcer
- Marginal keratitis
- Measles keratitis
- Meesman's corneal dystrophy
- Megalocornea
- Microcystic corneal dystrophy
- Microcystoid epithelial degeneration of cornea
- Mooren ulcer
- Mycobacterial keratitis
- Mycotic corneal ulcer

- Mycotic keratitis due to Fusarium
- Naevus of cornea
- Neuropathic corneal ulcer
- Neuropathic keratitis
- Neurotrophic keratoconjunctivitis
- Non-chemical burn of cornea and/or conjunctival sac
- Non-perforating wound of cornea
- Nummular keratitis
- Old keratitis
- Ophthalmic herpes simplex
- Penetrating keratoplasty
- Perforated corneal ulcer
- Perforation of cornea
- Peripheral pterygium, stationary
- Phakic corneal oedema
- Photokeratitis
- Phthisical cornea
- Phlyctenular keratoconjunctivitis
- Pigment on corneal endothelium (finding)
- Posterior corneal pigmentation
- Posterior crocodile shagreen of cornea
- Posterior embryotoxon
- Posterior endothelial keratoplasty
- Post-operative corneal oedema
- Pre-Descemet's corneal dystrophy
- Previous corneal graft
- Primary failure of corneal graft after penetrating keratoplasty
- Primary Sjogren syndrome
- Punctate keratitis
- Punctate keratopathy (finding)
- Recurrent erosion of cornea
- Recurrent herpes simplex infection of eye

- Reis-Buckler's corneal dystrophy
- Rejection of corneal graft after penetrating keratoplasty
- Rheumatoid melting disorder of cornea
- Rosacea keratitis
- Rupture in Descemet's membrane
- Salmon patch cornea
- Salzmann's nodular dystrophy
- Schnyder crystalline cornea dystrophy
- Sclerokeratitis
- Secondary Sjogren syndrome
- Senile furrow degeneration of cornea
- Sjogren syndrome
- Spheroidal degeneration
- Squamous cell carcinoma of cornea
- Stromal corneal dystrophy
- Superficial corneal pannus < 1 mm
- Superficial keratitis
- Superior limbic keratoconjunctivitis
- Terrien's marginal degeneration of cornea
- Thermal and radiation injury to cornea
- Thiel-behnke corneal dystrophy
- Thygeson superficial punctate keratitis
- Trachomatous pannus
- Toxic keratoconjunctivitis
- Traumatic corneal abrasion
- Visually significant corneal scar
- Von Hippel internal corneal ulcer
- Viral corneal ulcer
- Vortex keratopathy



## Diabetic retinopathy

- Active angle neovascularisation associated with diabetic retinopathy
- Active iris neovascularisation associated with diabetic retinopathy
- Advanced diabetic retinopathy
- Advanced diabetic retinal disease
- Advanced proliferative diabetic retinopathy
- Angle neovascularisation associated with diabetic retinopathy
- Anterior hyaloid face neovascularisation associated with diabetic retinopathy
- Background diabetic retinopathy
- Centrally involved macular oedema due to diabetes mellitus
- Clinically significant macular oedema
- Combined tractional / rhegmatogenous retinal detachment associated with diabetic retinopathy
- Diabetic macular ischaemia
- Diabetic macular oedema
- Diabetic macular oedema unresponsive to anti-vegf drugs
- Diabetic macular oedema unresponsive to ivta
- Diabetic macular oedema unresponsive to laser
- Diabetic macular oedema without clinically significant macular oedema
- Diabetic maculopathy
- Diabetic maculopathy ungradable
- Diabetic maculopathy with no clinically significant macular oedema
- Diabetic papillopathy
- Diabetic retinopathy associated with type I diabetes mellitus
- Diabetic retinopathy associated with type II diabetes mellitus
- Diabetic retinopathy (grade not specified)
- Diabetic retinopathy ungradable
- Diabetic traction retinal detachment
- Exudative maculopathy associated with type I diabetes mellitus
- Fibrovascular proliferation associated with diabetic retinopathy
- High risk proliferative diabetic retinopathy
- High risk proliferative diabetic retinopathy not amenable to photocoagulation

- Iris neovascularisation associated with diabetic retinopathy
- Ischaemic diabetic maculopathy
- Low risk proliferative diabetic retinopathy
- Macular off tractional retinal detachment associated with diabetic retinopathy
- Macular on tractional retinal detachment associated with diabetic retinopathy
- Macular retinal oedema
- Mild diabetic macular oedema
- Mild neovascularisation at the optic disc (< 1/3 disc area)
- Mild neovascularisation at the optic disc (> 1/3 disc area)
- Mild neovascularisation elsewhere (< 1/2 disc area)
- Mild neovascularisation elsewhere (> 1/2 disc area)
- Mild non-proliferative diabetic retinopathy
- Mild proliferative diabetic retinopathy
- Mild stromal corneal oedema
- Minimal non-proliferative diabetic retinopathy
- Mixed diabetic retinopathy
- Mixed diabetic macular oedema + ischaemia (not clinically significant macular oedema)
- Moderate diabetic macular oedema
- Moderate non-proliferative diabetic retinopathy
- Moderate proliferative diabetic retinopathy
- Neovascularisation at the optic disc associated with high risk proliferative diabetic retinopathy
- Neovascularisation of both the optic disc and retina associated with high risk proliferative diabetic retinopathy
- Neovascularisation of both the optic disc and retina associated with low risk proliferative diabetic retinopathy
- Neovascularisation of the retina associated with high risk proliferative diabetic retinopathy
- Non-high risk proliferative diabetic retinopathy with clinically significant macular oedema
- Non-high risk proliferative diabetic retinopathy with no macular oedema

- Non-proliferative diabetic retinopathy
- Optic disc neovascularisation associated with low risk proliferative diabetic retinopathy
- Pre-proliferative diabetic retinopathy
- Pre-retinal haemorrhage associated with diabetic retinopathy
- Progression of diabetic retinopathy
- Proliferative diabetic retinopathy
- Proliferative diabetic retinopathy – high risk
- Proliferative diabetic retinopathy – high risk with clinically significant macular oedema
- Proliferative diabetic retinopathy – high risk with no macular oedema
- Proliferative diabetic retinopathy – non-high risk
- Proliferative diabetic retinopathy - quiescent
- Proliferative diabetic retinopathy with high risk new vessels at the disc
- Proliferative diabetic retinopathy with high risk new vessels at the disc and elsewhere
- Proliferative diabetic retinopathy with high risk new vessels elsewhere
- Proliferative diabetic retinopathy with low risk new vessels at the disc
- Proliferative diabetic retinopathy with low risk new vessels at the disc and elsewhere
- Proliferative diabetic retinopathy with low risk new vessels elsewhere
- Quiescent angle neovascularisation associated with diabetic retinopathy
- Quiescent iris neovascularisation associated with diabetic retinopathy
- Quiescent PDR (regressed NVD)
- Quiescent PDR (regressed NVE)
- Scatter (PRP) retinal laser scars visible
- Severe diabetic macular oedema
- Severe non-proliferative diabetic retinopathy
- Severe non-proliferative diabetic retinopathy with clinically significant macular oedema
- Stable treated proliferative diabetic retinopathy
- Stable treated proliferative retinopathy due to diabetes mellitus

- Traction detachment of retina
- Traction detachment with vitreoretinal organisation
- Tractional retinal detachment associated with diabetic retinopathy
- Tractional retinal detachment associated with diabetic retinopathy - fovea detached
- Tractional retinal detachment associated with diabetic retinopathy - fovea not threatened
- Tractional retinal detachment associated with diabetic retinopathy - traction on fovea
- Tractional retinal detachment involving macular
- Tractional retinal detachment sparing macular
- Treated diabetic maculopathy
- Treated proliferative diabetic retinopathy
- Very mild non-proliferative diabetic retinopathy
- Very severe non-proliferative diabetic retinopathy
- Very severe nonproliferative diabetic retinopathy with no macular oedema
- Visually threatening diabetic retinopathy
- Vitreous haemorrhage associated with proliferative diabetic retinopathy

### **Epiretinal membrane**

- Epiretinal membrane
- Epiretinal membrane with macular pseudo hole
- Epiretinal membrane with vitreomacular traction
- Idiopathic epiretinal membrane
- Pseudo-macular hole
- Retinal folds associated with epiretinal membrane

### **Fuch's endothelial dystrophy**

- Fuchs' endothelial dystrophy

## **Glaucoma**

- Absolute glaucoma
- Acute angle closure
- Acute angle closure glaucoma
- Advanced open angle glaucoma
- Angle closure glaucoma
- Angle recession glaucoma
- Angle very narrow / closure imminent
- Anterior chamber drainage tube (physical object)
- Aphakic glaucoma
- Blebitis
- Childhood glaucoma associated with acquired condition
- Childhood glaucoma associated with non-acquired ocular anomalies
- Childhood glaucoma associated with non-acquired systemic disease of syndrome
- Childhood glaucoma following cataract surgery
- Childhood glaucoma of unknown aetiology
- Chronic angle closure glaucoma
- Chronic open angle glaucoma
- Ciliary block glaucoma
- Clear lens extraction for glaucoma
- Closed angle glaucoma (aniridia)
- Closed angle glaucoma (aphakic pupil block)
- Closed angle glaucoma (aqueous misdirection)
- Closed angle glaucoma (ciliary body cyst)
- Closed angle glaucoma (congenital anomaly)
- Closed angle glaucoma (epithelial ingrowth)
- Closed angle glaucoma (gas in vitreous)
- Closed angle glaucoma (ice syndrome)
- Closed angle glaucoma (inflammatory membrane)
- Closed angle glaucoma (intraocular tumour)
- Closed angle glaucoma (intumescent lens)

- Closed angle glaucoma (iris cyst)
- Closed angle glaucoma (lens dislocation)
- Closed angle glaucoma (neovascular)
- Closed angle glaucoma (plateau iris)
- Closed angle glaucoma (posterior polymorphous dystrophy)
- Closed angle glaucoma (ROP)
- Closed angle glaucoma (silicone oil)
- Closed angle glaucoma (uveal effusion - increased choroidal venous pressure)
- Closed angle glaucoma (uveal effusion - other)
- Closed angle glaucoma (uveal effusion - scleritis)
- Closed angle glaucoma (uveal effusion – tumour related)
- Closed angle glaucoma (uveitis)
- Closed angle glaucoma (wound leak)
- Congenital glaucoma (broad thumb syndrome)
- Congenital glaucoma (chromosomal anomaly)
- Congenital glaucoma (other)
- Cypass implant
- Disorder of filtering bleb
- Drainage bleb, functional (finding)
- Drug induced glaucoma
- Glaucoma
- Glaucoma and corneal anomaly
- Glaucoma associated with anterior segment anomaly
- Glaucoma associated with iridocorneal endothelial syndrome
- Glaucoma associated with ocular disorder
- Glaucoma associated with systemic syndromes
- Glaucoma associated with vascular disorder
- Glaucoma due to combination of mechanisms
- Glaucoma due to iris anomaly
- Glaucoma due to ocular vascular disorder
- Glaucoma due to perforating injury
- Glaucoma due to silicone oil

- Glaucoma of childhood
- Glaucoma with increased episcleral venous pressure
- Glaucoma with intraocular haemorrhage
- Glaucoma (other / undetermined)
- Glaucomatocyclitic crisis
- Glaucomatous atrophy of optic disc
- Haemolytic glaucoma
- Hydrus implant
- I-Stent inject implant
- Iatrogenic glaucoma
- Intermittent angle closure glaucoma
- Juvenile open angle glaucoma
- Leaking filtering bleb
- Lens particle glaucoma
- Low tension glaucoma
- Malignant glaucoma
- Mixed mechanism glaucoma
- Molteno implant
- Neovascular glaucoma
- Normal pressure glaucoma
- Normal tension glaucoma
- Open angle glaucoma
- Open angle glaucoma (aniridia)
- Open angle glaucoma with borderline intraocular pressure
- Open angle with cupping of optic discs
- Optic disc cupping
- Phacoanaphylactic glaucoma
- Phacolytic glaucoma
- Phacomorphic (secondary glaucoma)
- Pigmentary glaucoma
- Primary acute angle closure glaucoma
- Primary angle closure glaucoma

- Primary angle closure suspect (disorder)
- Primary congenital glaucoma
- Primary congenital glaucoma with infantile onset (>1-24 months)
- Primary congenital glaucoma with neonatal or newborn onset (0-1 months)
- Primary congenital glaucoma with spontaneously arrested
- Primary glaucoma due to combination of mechanisms
- Primary open angle glaucoma
- Preserflo implant
- Pseudoexfoliation glaucoma
- Residual stage angle-closure glaucoma
- Residual stage of corticosteroid-induced glaucoma
- Residual stage of open angle glaucoma
- Rubeotic glaucoma
- Rubeotic glaucoma associated with branch retinal vein occlusion
- Rubeotic glaucoma associated with central retina artery occlusion
- Rubeotic glaucoma associated with central retinal vein occlusion
- Rubeotic glaucoma associated with diabetic retinopathy
- Rubeotic glaucoma associated with hemi-retinal vein occlusion
- Residual stage angle closure glaucoma
- Secondary angle closure glaucoma
- Secondary angle closure glaucoma – synechial
- Secondary angle closure glaucoma with pupillary block
- Secondary glaucoma
- Secondary glaucoma due to combination mechanisms
- Secondary open angle glaucoma
- Secondary open angle glaucoma (acute anterior uveitis)
- Secondary open angle glaucoma (chronic anterior uveitis)
- Secondary open angle glaucoma (fuchs heterochromic cyclitis)
- Secondary open angle glaucoma (haemolytic)
- Secondary open angle glaucoma (intermediate uveitis)
- Secondary open angle glaucoma (ocular surgery or laser)
- Secondary open angle glaucoma (panuveitis)



- Secondary open angle glaucoma (raised episcleral venous pressure)
- Secondary open angle glaucoma (retinal detachment)
- Secondary open angle glaucoma (siderosis)
- Secondary open angle glaucoma (steroid induced)
- Secondary open angle glaucoma (trauma)
- Secondary open angle glaucoma (trauma, other)
- Secondary open angle glaucoma (traumatic angle recession)
- Secondary open angle glaucoma (tumour infiltration)
- Steroid-induced glaucoma – borderline
- Steroid-induced glaucoma residual stage
- Steroid induced glaucoma glaucomatous stage
- Steroid responder (raised pressure / glaucoma)
- Uveitic glaucoma
- Xen gel implant

**Glaucoma suspect (This is not used in cataract or AMD analysis as an ocular co-pathology)**

- Asymmetric optic disc cupping
- Borderline glaucoma
- Glaucoma suspect
- Open angle glaucoma suspect
- Optic disc cupped
- Primary angle closure suspect
- Raised intraocular pressure
- Steroid responder

## Inherited eye diseases

- Abnormal peripheral rod function (full field ERG)
- Adult vitelliform macular dystrophy
- Albinism
- Angio-oedema of eyelids
- Atrophia bulborum hereditaria
- Autosomal dominant retinitis pigmentosa
- Autosomal dominant vitreoretinopathopathy
- Autosomal recessive optic atrophy
- Avellino corneal dystrophy
- Best disease
- Best disease (atrophic stage)
- Best disease (choroidal neovascular membrane stage)
- Best disease (cicatricial stage)
- Best disease (pseudohypopyon stage)
- Best disease (scrambled egg stage)
- Best disease (vitelliform stage)
- Choroidal neovascular membrane associated with Sorsby fundus dystrophy
- Cone dystrophy
- Congenital fibrosis syndrome
- Congenital hereditary endothelial dystrophy
- Congenital hypertrophy of retinal pigment epithelium
- Congenital non-progressive myopathy with Moebius and Robin sequences
- Congenital stationary night blindness
- Diffuse choroidal atrophy
- Generalised progressive retinal atrophy
- Goldenhar syndrome
- Gyrate atrophy
- Hereditary haemorrhagic telangiectasia
- Hereditary macular dystrophy
- Hereditary motor and sensory neuropathy with retinitis pigmentosa

- Hereditary optic atrophy
- Hereditary retinal dystrophy
- Hereditary retinal artery tortuosity
- Hereditary retinal dystrophy
- Hereditary vitreoretinopathy
- Inherited optic neuropathy
- Juvenile retinoschisis
- Kearns-Sayre syndrome
- Labrador keratopathy
- Lattice corneal dystrophy type 1
- Lattice corneal dystrophy type 2
- Lattice corneal dystrophy, isolated form
- Leber hereditary optic neuropathy
- Leber's optic atrophy
- Neurofibromatosis 1
- Neurofibromatosis 1 (orbit)
- Neurogenic muscle weakness, ataxia and retinitis pigmentosa
- North Carolina macular dystrophy
- Marinesco-Sjogren syndrome
- Pigmentary retinal dystrophy
- Reis-buckler's corneal dystrophy
- Retinitis pigmentosa
- Retinitis pigmentosa associated with deafness
- Retinopathy associated with Friedreich ataxia
- Retinopathy associated with olivopontocerebellar atrophy
- Rod dystrophy
- Schnyder crystalline cornea dystrophy
- Sjogren-Larsson syndrome
- Snowflake retinal degeneration
- Sorsby fundus dystrophy
- Stargardt disease
- Stargardt disease (abnormal pattern electroretinogram)

- Stargardt disease (atrophic maculopathy with flecks)
- Stargardt disease (atrophic maculopathy without flecks)
- Stargardt disease (atrophic maculopathy)
- Stargardt disease (full field electroretinogram – abnormal peripheral cone and rod function)
- Stargardt disease (full field electroretinogram – abnormal peripheral cone function)
- Stargardt disease (fundus flavimaculatos phenotype)
- Thiel-behnke corneal dystrophy
- Usher syndrome
- Usher syndrome type 1
- Usher syndrome type 2
- Von Hippel internal corneal ulcer
- Weill-Marchesani syndrome
- Xeroderma pigmentosum of eyelid
- X-linked carrier of retinitis pigmentosa
- X-linked retinitis pigmentosa
- X-linked retinitis pigmentosa carrier

### **Macular hole**

- Degeneration of macula due to cyst, hole or pseudohole
- Epiretinal membrane associated with a macular hole
- Full thickness macular hole
- Impending macular hole
- Lamellar macular hole
- Lamellar / Stage 1 macular hole
- Macular hole
- Macular hole associated with high myopia
- Macular hole closed after surgery
- Macular hole open but flat on the RPE after surgery
- Macular microhole
- Stage I macular hole

- Stage II macular hole
- Stage III macular hole
- Stage IV macular hole

## **Myopia**

- Axial myopia
- Choroidal neovascular membrane associated with myopia
- Congenital axial myopia
- Degenerative progressive high myopia
- Dome shaped maculopathy
- Forster-fuchs spot (myopia)
- High myopia
- High myopia (6 or more dioptres)
- Index myopia
- Lacquer cracks (myopia)
- Low myopia < 6 dioptres
- Myopia
- Myopic CNV
- Myopic chorioretinal dystrophy
- Myopic foveoschisis
- Myopic macular degeneration
- Optic disc myopic changes
- Pathologic myopia
- Posterior staphyloma
- Punctate inner choroidopathy associated with myopia
- Retinal detachment associated with myopia
- Retinal hole associated with myopia
- Retinal tear associated with myopia
- Scleral staphyloma
- Severe myopia
- Simple myopia
- Staphyloma (myopia)

### **No fundal view**

- Cataract extraction to improve fundal view
- No fundal view
- No fundal view and red reflex absent
- No fundal view but red reflex present

### **Ocular hypertension (This is not used in cataract or AMD analysis as an ocular co-pathology)**

- Ocular hypertension due to steroid
- Ocular hypertension with uveitis
- Patent peripheral iridotomy (finding)
- Primary ocular hypertension
- Raised intraocular pressure

### **Ocular motility**

- III (oculomotor) nerve palsy
- III (oculomotor) nerve palsy (pupillomotor fibres)
- IV (trochlear) nerve palsy
- VI (abducens) nerve palsy
- VII (facial) nerve palsy
- A pattern strabismus
- Abducens nerve disorder
- Abducens nerve weakness
- Abducting nystagmus
- Aberrant regeneration following III (oculomotor) nerve palsy
- Acquired nystagmus
- Acquired pendular nystagmus
- Age-related distance esotropia
- Age-related strabismus
- Alternating esotropia with A pattern

- Alternating exotropia with X pattern
- Alternating exotropia with Y pattern
- Alternating hypertropia
- Basilar III (oculomotor) nerve palsy
- Basilar IV (trochlear) nerve palsy
- Basilar VI (abducens) nerve palsy
- Benign paroxysmal positional vertigo or nystagmus
- Binocular vision disorder
- Brown syndrome (congenital & acquired)
- Brown's tendon sheath syndrome
- Cavernous III (oculomotor) nerve palsy
- Cavernous IV (trochlear) nerve palsy
- Cavernous VI (abducens) nerve palsy
- Congenital exotropia
- Congenital failure of eye elevation
- Congenital fibrosis syndrome
- Congenital IV (Trochlear) nerve palsy
- Congenital nystagmus
- Congenital nystagmus with sensory abnormality
- Congenital strabismus
- Constant esotropia with accommodative element
- Convergence spasms
- Convergent microtropia
- Cyclic III nerve palsy
- Cyclic esotropia
- Decompensated exophoria
- Divergence insufficiency
- Disorder of extraocular muscle
- Disorder of oculomotor system
- Distance exotropia
- Dissociated strabismus
- Divergent concomitant strabismus

- Divergent microtropia
- Double elevator palsy
- Downbeat nystagmus
- Duane's syndrome, type 1
- Dysfunction of inferior oblique muscle
- Esotropia
- Esotropia with dissociated vertical deviation
- Esotropia with nystagmus
- Exotropia
- External ophthalmoplegia
- Extraocular muscle restriction
- Fascicular IV (trochlear) nerve palsy
- Fascicular VI (abducens) nerve palsy (Foville syndrome)
- Fascicular VI (abducens) nerve palsy (Millard-Gubler syndrome)
- Fat adherence syndrome of extraocular muscle
- Fixation nystagmus
- Fully accommodative esotropia
- Heteronymous diplopia
- Horizontal gaze palsy
- Horizontal nystagmus
- Hyperphoria
- III (Oculomotor) nerve palsy – Inferior division only
- Incomitant esophoria
- Injury to oculomotor nerve
- Infantile esotropia
- Infantile nystagmus syndrome
- Inferior oblique underaction
- Intermittent esotropia
- Intermittent vertical heterotropia
- Internal ophthalmoplegia
- Internuclear ophthalmoplegia
- Jerk nystagmus



- Lagophthalmos (finding)
- Latent convergent squint
- Latent divergent squint
- Latent nystagmus
- Local conjunctival adhesions
- Macrosaccadic oscillations
- Malignant tumour of conjunctiva
- Manifest alternating convergent squint
- Manifest alternating divergent squint
- Manifest latent nystagmus
- Manifest nystagmus
- Manifest vertical squint
- Mechanical strabismus
- Medial rectus underaction
- Microtropia
- Monocular esotropia
- Monocular esotropia with A pattern
- Monocular esotropia with V pattern
- Monocular esotropia with noncommitance other than A or V pattern
- Monocular exotropia
- Monocular exotropia with A pattern
- Monocular exotropia with X and/or Y pattern
- Monocular exotropia with V pattern
- Monocular exotropia with Y pattern
- Monocular exotropia with noncommitance other than A or V pattern
- Myopathy of extraocular muscles
- Near exotropia
- Nuclear IV (trochlear) nerve palsy
- Nuclear VI (abducens) nerve palsy
- Nystagmus
- Ocular myasthenia with strabismus
- Oculomotor apraxia

- Ophthalmoplegia
- Orbital III (oculomotor) nerve palsy
- Orbital IV (trochlear) nerve palsy
- Orbital VI (abducens) nerve palsy
- Paired nuclear III (oculomotor) nerve palsy
- Palsy of conjugate gaze
- Paralytic strabismus
- Paretic esotropia
- Periodic alternating nystagmus
- Permanent nystagmus
- Pontine one and a half syndrome
- Primary esotropia
- Progressive supranuclear palsy
- Pupil sparing third nerve palsy
- Ptosis due to a III nerve palsy
- Ptosis due to congenital simple double elevator palsy
- Recurrent painful ophthalmoplegic neuropathy syndrome (RPON)
- Refractive accommodative esotropia
- Residual vertical deviation
- Restrictive strabismus due to orbital fibrosis
- Rotational nystagmus
- Secondary esotropia
- Secondary exotropia
- See-saw nystagmus
- Sensory deprivation esotropia
- Sixth nerve palsy
- Skew deviation
- Strabismic amblyopia
- Strabismus (squint)
- Strabismus following surgery (excluding strabismus surgery)
- Strabismus in neuromuscular disorder
- Superior division third nerve palsy

- Superior oblique myokymia
- Superior rectus underaction
- Supranuclear eye movement disorders
- Temporary nystagmus
- Third cranial nerve disease
- Total oculomotor nerve palsy
- Total ophthalmoplegia
- Triage category: immediate suspected painful third nerve palsy
- Unpaired nuclear III (oculomotor) nerve palsy
- Vertical gaze palsy
- Vertical heterophoria
- Vertical nystagmus
- Visual nystagmus
- V-pattern esotropia
- V pattern vergence
- Y pattern strabismus

### **Optic nerve / CNS disease**

- Abnormal vision as a late effect of cerebrovascular disease
- Acute compressive optic neuropathy
- Alcoholic amblyopia
- Anterior ischaemic optic neuropathy
- Anterior ischaemic optic neuropathy secondary to giant cell arteritis
- Arteritic anterior ischaemic optic neuropathy
- Atrophy of sector of optic disc
- Autosomal recessive optic atrophy
- Calcified optic disc drusen
- Cavernous haemangioma
- Cerebral visual impairment
- Coloboma of optic disc
- Compression of optic chiasm
- Compressive optic atrophy

- Congenital anomaly of optic disc
- Congenital anomaly of optic nerve
- Congenital coloboma of optic disc
- Congenital nystagmus
- Congenital sixth nerve palsy
- Cortical blindness
- Diabetic optic papillopathy
- Disorder of optic chiasm due to pituitary disorder
- Disorder of optic nerve
- Dominant hereditary optic atrophy
- Drug induced optic neuropathy
- Drusen of optic disc
- Enlargement of cup
- Glioma
- Hereditary optic atrophy
- Homonymous quadrantanopia
- Horner syndrome miosed pupil
- Hypertensive optic neuropathy
- Hypoplasia of optic disc
- Hypoplasia of the optic nerve
- Idiopathic optic disc swelling
- Infiltrate optic neuropathy
- Inherited optic neuropathy
- Ischaemic optic neuropathy
- Leber's amaurosis
- Leber's optic atrophy
- Malignant tumour of optic nerve and sheath
- Meningioma of optic nerve sheath
- Metastasis to nervous system and eye
- Morning glory disc
- Multiple sclerosis
- Neoplasm of nerve sheath origin

- Neurofibromatosis 1
- Neurofibromatosis 1 (orbit)
- Neovascularisation at the optic disc
- Non-arteritic ischaemic optic neuropathy
- Nutritional amblyopia
- Nutritional optic neuropathy
- Occipital cerebral infarction
- Optic atrophy
- Optic atrophy associated with retinal dystrophy
- Optic atrophy secondary to papilloedema
- Optic chiasm disorder
- Optic atrophy secondary to vitamin B12 deficiency
- Optic disc disorder
- Optic disc drusen
- Optic disc haemorrhage
- Optic disc hyperaemia
- Optic disc oedema
- Optic disc neovascularisation
- Optic disc pit
- Optic disc swelling
- Optic disc swelling secondary to compression
- Optic disc swelling secondary to infiltrative
- Optic disc pit with serous detachment of macula
- Optic disc structural anomaly
- Optic disc vascular anomaly
- Optic nerve coloboma
- Optic nerve compression
- Optic nerve drusen
- Optic nerve fibrosis
- Optic nerve glioma
- Optic nerve hypoplasia
- Optic nerve infarction

- Optic nerve meningioma
- Optic nerve neurofibroma
- Optic nerve or central nervous system disease
- Optic nerve perforation
- Optic nerve sheath fenestration
- Optic neuritis
- Optic neuritis due to adjacent infection
- Optic neuritis due to demyelination
- Optic neuritis due to granulomatous inflammation
- Optic neuropathy
- Optic papillitis
- Optic tract disorders
- Orbital schwannoma
- Paracentral scotoma
- Pituitary adenoma
- Pituitary macroadenoma
- Posterior ischaemic optic neuropathy
- Primary progressive multiple sclerosis
- Right homonymous inferior quadrantanopia
- Quadrantanopia
- Radiation damage to optic nerve
- Relative afferent pupillary defect
- Secondary optic nerve sheath meningioma
- Secondary optic neuropathy
- Secondary tumours of the optic disc and optic nerve
- Specified optic disc anomalies
- Supranuclear deviations
- Toxic amblyopia
- Toxic optic neuropathy
- Traumatic optic neuropathy
- Unilateral swollen optic disc
- Visual field defect

- Vitamin B12 deficiency optic neuropathy

### **Other macular pathology**

- Acquired peripheral telangiectasia
- Acute central serous retinopathy
- Acute central serous retinopathy with subretinal fluid
- Acute macular neuroretinitis
- Acute macular neuroretinopathy
- Acute zonal occult outer retinopathy
- Albinotic fundus
- Best disease
- Best disease (atrophic stage)
- Best disease (choroidal neovascular membrane stage)
- Best disease (cicatrical stage)
- Best disease (pseudohypopyon stage)
- Best disease (scrambled egg stage)
- Best disease (vitelliform stage)
- Best vitelliform macular dystrophy
- Bilateral juxtafoveal telangiectasia
- Bilateral macular telangiectasia
- Bull's eye macular dystrophy
- Central serous retinopathy
- Central serous retinopathy associated with corticosteroid use
- Central serous retinopathy associated with hyperopia
- Central serous retinopathy associated with idiopathic polypoidal choroidal vasculopathy
- Central serous retinopathy associated with retinal / choroidal folds
- Central serous retinopathy associated with retinal detachment
- Central serous retinopathy with pit of optic disc
- Central serous retinopathy with small retinal epithelial detachment
- Chloroquine toxic retinopathy

- Choroidal neovascular membrane associated with central serous chorioretinopathy
- Choroidal neovascular membrane associated with juxtafoveal telangiectasia
- Choroidal neovascular membrane associated with macular telangiectasia
- Choroidal neovascular membrane associated with pachychoroid spectrum
- Chronic central serous retinopathy
- Chronic central serous retinopathy with diffuse retinal pigment epithelial detachment
- Cone dystrophy
- Congenital macular changes
- Cystoid macular oedema
- Diffuse retinal dysplasia
- Disorder of macular retina
- Dome shaped maculopathy
- Focal diabetic maculopathy
- Foster-Fuchs' spot
- Group 1a: unilateral congenital juxtafoveal telangiectasia
- Group 1b: unilateral idiopathic focal juxtafoveal telangiectasia
- Group 1b: unilateral, idiopathic, focal juxtafoveal telangiectasia
- Group 2a: bilateral idiopathic acquired juxtafoveal telangiectasia
- Group 2a: bilateral, idiopathic, acquired juxtafoveal telangiectasia
- Group 2b: juvenile occult familial idiopathic juxtafoveal telangiectasia
- Group 3a: occlusive idiopathic juxtafoveal telangiectasia
- Group 3b: occlusive idiopathic juxtafoveal telangiectasia associated with central nervous system vasculopathy
- Fibrovascular macular scar
- Focal exudative diabetic macular eodema
- Hydrochloroquine retinopathy
- Idiopathic juxtafoveal telangiectasia
- Idiopathic macular telangiectasia type 1
- Inactive central serous retinopathy with focal retinal pigment epithelial detachment



- Intraretinal haemorrhage
- Intraretinal haemorrhage at edge of lesion
- Intraretinal haemorrhage in centre of lesion
- Intraretinal haemorrhage involving fovea
- Juxtafoveal telangiectasia
- Juxtafoveal telangiectasia associated with choroidal neovascularisation
- Juxtafoveal telangiectasia associated with systemic disease
- Juxtafoveal telangiectasia with retinal ischaemia
- MacTel Type 1
- Macular dot haemorrhage
- Macular dystrophy
- Macular exudate
- Macular laser scars visible
- Macular pigment deposit
- Macular retinoschisis
- Macular subretinal haemorrhage
- Macular telangiectasia
- Macular telangiectasia associated with systemic disease
- Macular traction syndrome
- Macular vitelliform deposits
- Maculopathy
- Mature scar
- Measles retinopathy
- Melanoma associated retinopathy
- Myopic choroidal neovascularization
- Necrotising herpetic retinopathy
- Noncystoid oedema of macular of retina
- Occult macular dystrophy
- On hydroxychloroquine - retinal screening required
- Operating microscope-induced maculopathy
- Optic disc pit with serous detachment of macula
- Pachychoroid pigment epitheliopathy

- Pachychoroid spectrum
- Paracentral acute middle maculopathy (PAMM)
- Post-radiation maculopathy
- Progressive cone-rod dystrophy
- Radiation maculopathy
- Retinal dysplasia
- Retinal dystrophy
- Retinal oedema
- Retinal pigment epithelial abnormality
- Retinal scar
- Rubella retinopathy
- Scar of posterior pole of eye
- Scarred macular
- Serous detachment of retinal pigment epithelium
- Serous macular detachment
- Sjogren-Larsson syndrome
- Solar maculopathy
- Sorsby fundus dystrophy
- Stargardt disease
- Stargardt disease (abnormal pattern electroretinogram)
- Stargardt disease (atrophic maculopathy with flecks)
- Stargardt disease (atrophic maculopathy without flecks)
- Stargardt disease (atrophic maculopathy)
- Stargardt disease (full field electroretinogram – abnormal peripheral cone and rod function)
- Stargardt disease (full field electroretinogram – abnormal peripheral cone function)
- Stargardt disease (fundus flavimaculatos phenotype)
- Sub-foveal fibrosis
- Subretinal fibrosis
- Tamoxifen retinopathy
- Telangiectasia of macular lutea

- Toxic maculopathy
- Toxic retinopathy secondary to metamphetamine
- Unilateral juxtafoveal telangiectasia
- Variant central serous chorioretinopathy
- Vitelliform dystrophy
- Vitreomacular adhesion (disorder)
- Vitreomacular traction
- Vitreomacular traction with incomplete posterior vitreous detachment
- Vitreomacular traction syndrome
- Vitreo-retinal adhesions
- Vitreous touch syndrome
- Welding arc-induced maculopathy
- Acute central serous retinopathy
- Chronic central serous chorioretinopathy

#### **Other retinal vascular pathology**

- Acquired peripheral telangiectasia
- Amaurosis fugax
- Arterial retinal branch occlusion
- Arteriosclerotic retinopathy
- Avascular retinal pigment epithelial detachment
- Branch macular artery occlusion
- Branch retinal artery occlusion
- Branch retinal artery occlusion with a visible embolus
- Branch retinal vein occlusion
- Branch retinal vein occlusion with disc collaterals
- Branch retinal vein occlusion with macular ischaemia
- Branch retinal vein occlusion with macular oedema
- Branch retinal vein occlusion with neovascularisation
- Branch retinal vein occlusion with no neovascularisation
- Branch retinal vein occlusion with retinal collaterals
- Carcinoma-associated retinopathy

- Cavernous haemangioma of the retina
- Central retinal artery occlusion
- Central retinal artery occlusion with a visible embolus
- Central retinal vein occlusion
- Central retinal vein occlusion – juvenile with macular pathology
- Central retinal vein occlusion – ischaemic
- Central retinal vein occlusion – non-ischaemic
- Central retinal vein occlusion with disc collaterals
- Central retinal vein occlusion with macular ischaemia
- Central retinal vein occlusion with macular oedema
- Central retinal vein occlusion with neovascularisation
- Central retinal vein occlusion with retinal neovascularisation
- Central retinal vein occlusion with retinal collaterals
- Central serous chorioretinopathy
- Central serous retinopathy associated with retinal / choroidal folds
- Central serous retinopathy with pit of optic disc
- Central serous retinopathy with small retinal pigment epithelial detachment
- Choroidal haemangioma
- Choroidal haemangioma - circumscribed
- Choroidal infarction
- Cilioretinal artery occlusion
- Coats syndrome
- Coats-like syndrome
- Combined hamartoma of retina
- Cotton wool spots
- Cryotherapy burn to retina
- Eales' disease
- Exudative retinopathy
- Generalised retinal degeneration
- Haemangioma of retina
- Hamartoma of retina
- Hemi-retinal vein occlusion

- Hemi-retinal vein occlusion with disc collaterals
- Hemi-retinal vein occlusion with macular ischaemia
- Hemi-retinal vein occlusion with macular oedema
- Hemi-retinal vein occlusion with retinal collaterals
- Hemispheric retinal vein occlusion
- Hemispheric retinal vein occlusion with macular oedema
- Hemispheric retinal vein occlusion with neovascularisation
- Herpes zoster acute retinal necrosis
- Hyphaema associated with central retinal vein occlusion
- Hyphaema associated with hemi-retinal vein occlusion
- Hypertensive choroidopathy
- Hypertensive retinopathy
- Hyperviscosity retinopathy
- Idiopathic polypoidal choroidal vasculopathy
- Idiopathic retinitis
- Incipient occlusion of retinal vein
- Inferior hemispheric retinal vein occlusion
- Inferonasal branch retinal vein occlusion
- Inferotemporal branch retinal vein occlusion
- Inferotemporal branch retinal vein occlusion with macular oedema
- Iris rubeosis
- Ischaemic branch retinal vein occlusion
- Leber miliary aneurysms
- Leukaemic infiltrate of retina
- Lipaemia retinalis
- Macular branch retinal vein occlusion
- Macular telangiectasia associated with choroidal neovascularisation
- Macular telangiectasia with retinal ischaemia
- Malignant melanoma of retina
- Metastatic lesion of the choroid - Primary unknown
- Multiple retinal artery aneurysms
- Neovascularisation of the angle associated with branch retinal vein occlusion

- Neovascularisation of the angle associated with central retinal vein occlusion
- Neovascularisation of the angle associated with hemi-retinal vein occlusion
- Neovascularisation of the disc associated with branch retinal vein occlusion
- Neovascularisation of the disc associated with hemi-retinal vein occlusion
- Neovascularisation of the iris associated with branch retinal vein occlusion
- Neovascularisation of the iris associated with central retinal vein occlusion
- Neovascularisation of the iris associated with hemi-retinal vein occlusion
- Neovascularisation of the optic disc associated with central retinal vein occlusion
- Neovascularisation of the retina associated with branch retinal vein occlusion
- Neovascularisation of the retina associated with central retinal vein occlusion
- Neovascularisation of the retina associated with hemi-retinal vein occlusion
- Papillophlebitis
- Peripheral arteriovenous malformation
- Peripheral exudative haemorrhagic chorioretinopathy
- Peripheral retinal telangiectatic mass
- Peripheral retinal neovascularisation
- Photocoagulation burn to retina
- Pigmented paravenous retinochoroidal atrophy
- Proliferative sickle cell retinopathy stage I (peripheral arterial occlusion)
- Proliferative sickle cell retinopathy stage III (fibrovascular proliferation – sea fan)
- Regressed retinopathy of prematurity
- Retinal artery embolus
- Retinal artery macroaneurysm
- Retinal collateral vessels
- Retinal exudates
- Retinal flame haemorrhage
- Retinal ghost vessels
- Retinal haemangioblastomatosis
- Retinal haemorrhage
- Retinal lymphoma
- Retinal microaneurysm
- Retinal neovascularisation

- Retinal pigment epithelium atrophy
- Retinal telangiectasia
- Retinal vascular proliferation
- Retinal vascular vasculitis
- Retinal vasculitis due to systemic lupus erythematosus
- Retinal vein occlusion
- Retinal vein occlusion with macular oedema
- Retinal veins dilated (finding)
- Retinopathy associated with Friedreich ataxia
- Retinopathy of Prematurity stage 1 (demarcation line)
- Retinopathy of Prematurity stage 2 (ridge)
- Retinopathy of Prematurity stage 3 (ridge with extraretinal fibrovascular proliferation)
- Retinopathy of Prematurity stage 4 (retinal detachment)
- Retinopathy of Prematurity stage 4a (extrafoveal retinal detachment)
- Retinopathy of Prematurity stage 4b (partial retinal detachment including fovea)
- Retinopathy of Prematurity stage 5 (total retinal detachment)
- Rubeotic glaucoma associated with branch retinal vein occlusion
- Rubeotic glaucoma associated with central retina artery occlusion
- Rubeotic glaucoma associated with central retinal vein occlusion
- Rubeotic glaucoma associated with hemi-retinal vein occlusion
- Sickle cell haemoglobin C retinopathy
- Superficial retinal haemorrhage
- Superior hemiretinal vein occlusion with macular oedema
- Superior hemiretinal vein occlusion without macular oedema
- Superior hemispheric retinal vein occlusion
- Superonasal branch retinal vein occlusion
- Superotemporal branch retinal vein occlusion
- Superotemporal branch retinal vein occlusion with macular oedema
- Superotemporal branch retinal vein occlusion without macular oedema
- Telangiectasia disorder
- Toxic tumour syndrome

- Varix of the vortex vein ampulla
- Vasoproliferative tumour of retina
- Venous retinal branch occlusion
- Venous stasis retinopathy
- Vitreous haemorrhage associated with branch retinal vein occlusion
- Vitreous haemorrhage associated with central retinal vein occlusion
- Vitreous haemorrhage associated with hemi-retinal retinal vein occlusion

### **Phacodonesis**

- Phacodonesis
- Zonular dialysis

### **Previous laser refractive surgery**

- LASIK surgery
- Previous laser treatment
- Previous laser refractive surgery

### **Previous retinal detachment surgery**

- Adverse reaction to oil
- Buckle - revision / replacement
- Buckle removal
- Closed angle glaucoma (silicone oil)
- Extrusion of scleral buckle
- Good fill of vitreous cavity with silicone oil
- History of laser retinopexy for retinal tear
- Iatrogenic retinal tear
- Low buckle indent
- No visible buckle indent
- Oil in vitreous cavity (finding)
- Partial recent retinal detachment with retinal dialysis



- PVR caused failed retinal detachment surgery
- PVR grade C
- PVR grade CA10
- PVR grade CP11
- PVR grade CP7
- Recent subtotal retinal detachment
- Recent total retinal detachment
- Rhegmatogenous retinal detachment (1 previous operation for RD)
- Rhegmatogenous retinal detachment (2 previous operations for RD)
- Rhegmatogenous retinal detachment (>2 previous operations for RD)
- Rhegmatogenous retinal detachment (primary) – if prior to cataract surgery
- Rhegmatogenous retinal detachment associated with myopia
- Silicone adverse reaction
- Silicone filled eye
- Silicone oil bubble in the anterior cavity
- Sub-conjunctival silicone oil
- Successfully treated retinal detachment
- Treated retinal break re-opening caused failed retinal detachment surgery
- Unsuccessfully treated retinal detachment
- Untreated retinal break caused failed retinal detachment surgery

#### **Previous trabeculectomy surgery**

- Anterior chamber drainage tube (physical object)
- Trabeculectomy bleb
- Trabeculectomy bleb flat
- Trabeculectomy bleb formed

## Previous vitrectomy surgery

- 10% air fill of vitreous cavity
- 10% gas fill of vitreous cavity
- 20% air fill of vitreous cavity
- 20% gas fill of vitreous cavity
- 30% air fill of vitreous cavity
- 30% gas fill of vitreous cavity
- 40% air fill of vitreous cavity
- 40% gas fill of vitreous cavity
- 50% air fill of vitreous cavity
- 50% gas fill of vitreous cavity
- 60% air fill of vitreous cavity
- 60% gas fill of vitreous cavity
- 70% air fill of vitreous cavity
- 70% gas fill of vitreous cavity
- 80% air fill of vitreous cavity
- 80% gas fill of vitreous cavity
- 90% air fill of vitreous cavity
- 90% gas fill of vitreous cavity
- Adverse reaction to oil
- Closed angle glaucoma (silicone oil)
- Gas in vitreous cavity
- Good fill of vitreous cavity with silicone oil
- Glaucoma due to silicon oil
- Heavy liquid in ac
- Heavy silicone oil
- Macular displacement
- Macular hole - status postoperative
- Macular hole closed after surgery
- Macular hole open & elevated after surgery
- Macular hole open after surgery

- Macular hole open but flat on the rpe after surgery
- Oil in vitreous cavity (finding)
- Peeled ERM
- Post-vitrectomy cataract
- Removal of silicone oil
- Silicone adverse reaction
- Silicone filled eye
- Silicone oil bubble in the anterior cavity
- Silicone oil droplets on intraocular lens
- Silicone oil filling anterior chamber
- Silicone oil in vitreous cavity
- Sub-conjunctival gas
- Sub-conjunctival silicone oil
- Vitrectomised eye

### **Pseudoexfoliation**

- Exfoliation of lens capsule
- Pseudoexfoliation
- Pseudoexfoliation syndrome

### **Retinal detachment**

- 1 quadrant of retina detached
- 2 quadrants of retina detached
- 3 quadrants of retina detached
- 4 quadrants of retina detached
- Central serous retinopathy associated with retinal detachment
- Chronic rhegmatogenous retinal detachment
- Chronic rhegmatogenous retinal detachment - macula off
- Chronic rhegmatogenous retinal detachment - macula on
- Flat retinoschisis
- Giant retinal tear

- Largest retinal break 4 clock hours
- Largest retinal break 7 clock hours
- Largest retinal break 8 clock hours
- Largest retinal break 10 clock hours
- New partial retinal detachment with giant retinal tear defect
- New partial retinal detachment with multiple defects
- Partial recent retinal detachment with single defect
- Peripheral retinal degeneration
- Peripheral retinoschisis
- Retinal break in schisis
- Retinal breaks – multiple defects
- Retinal detachment
- Retinal detachment associated with myopia
- Retinal detachment – subretinal fluid
- Retinal detachment with retinal defect
- Retinal traction tear
- Retinoschisis – inner leaf break
- Retinoschisis – outer leaf break
- Rhegmatogenous retinal detachment
- Rhegmatogenous retinal detachment - macula off
- Rhegmatogenous retinal detachment - macula on
- Rhegmatogenous retinal detachment (1 previous operation for RD)
- Rhegmatogenous retinal detachment (2 previous operations for RD)
- Rhegmatogenous retinal detachment (>2 previous operations for RD)
- Rhegmatogenous retinal detachment (primary)
- Rhegmatogenous retinal detachment associated with myopia
- Rhegmatogenous retinal detachment with multiple breaks
- Schwartz ocular syndrome
- Serous retinal detachment
- Solid retinal detachment
- Unsuccessfully treated retinal detachment
- Untreated retinal break caused failed retinal detachment surgery

## **Stickler syndrome**

- Stickler syndrome
- Type 1 congenital vitreous anomaly

## **Synaechiae**

- Anterior synechiae
- Complete posterior synechiae
- Incomplete posterior synechiae
- Peripheral anterior synechiae
- Posterior synechiae

## **Uveitis**

- 1+ vitreous inflammation
- 2+ vitreous inflammation
- 3+ vitreous inflammation
- 4+ vitreous inflammation
- Acute and subacute iridocyclitis
- Acute anterior uveitis
- Acute iritis
- Acute posterior multifocal placoid pigment epitheliopathy
- Acute retinal necrosis
- Acute toxoplasmosis
- Ankylosing spondylarthritis and eye lesions
- Anterior uveitis
- Anterior uveitis in juvenile idiopathic arthritis
- Brawny scleritis
- Cat scratch disease
- Cataract secondary to uveitis
- Childhood onset uveitis

- Chorioretinitis
- Choroidal neovascular membrane associated with uveitis
- Choroiditis
- Chronic anterior uveitis
- Cyclitis
- Cytomegalovirus retinitis
- Disseminated chorioretinitis
- Drug induced uveitis
- Familial granulomatous inflammatory arthritis, dermatitis and uveitis
- Focal retinitis
- Fuch's heterochromic cyclitis
- Fungal chorioretinitis
- Granulomatous chorioretinitis
- Herpes simplex iridocyclitis
- Herpes simplex iritis
- Herpes simplex keratouveitis
- Herpes zoster
- Herpes zoster iridocyclitis
- Herpes zoster retinitis
- Herpetic iridocyclitis
- Histoplasmosis uveitis
- Idiopathic uveitis
- Infective scleritis
- Infective uveitis
- Inflammatory disorder of the eye
- Immune recovery uveitis
- Intermediate uveitis
- Iritis
- Iritis in Behcet's syndrome
- Iritis in psoriatic arthritis
- Iritis with Crohn's disease
- Iritis with inflammatory bowel disease

- Keratic precipitates (finding)
- Keratouveitis
- Lyme disease uveitis
- Macular oedema associated with uveitis
- Masquerade syndrome
- Multifocal choroiditis
- Multifocal choroiditis and panuveitis syndrome
- Multifocal inner choroiditis
- Necrotising scleritis
- Nodular scleritis
- Non-infectious anterior uveitis
- Non-infectious uveitis of posterior segment of eye
- Non-pyogenic granulomatous scleritis
- Ocular histoplasmosis syndrome
- Ocular hypertension with uveitis
- Ocular onchocerciasis
- Orbital scleritis
- Panophthalmitis
- Pars planitis
- Panuveitis
- Panuveitis in bechet's syndrome
- Phacoanaphylaxis
- Phacoantigenic uveitis
- Phacotoxic uveitis
- Post inflammatory chorioretinal scar
- Post-surgical chorioretinal scar
- Posterior scleritis
- Posterior uveitis
- Post-operative uveitis
- Progressive outer retinal necrosis
- Recurrent anterior uveitis
- Retinal pigment epitheliitis

- Retinitis
- Rheumatoid scleritis
- Sarcoid chorioretinitis
- Sarcoid uveitis
- Sarcoidosis
- Sarcoidosis uveitis
- Scleritis
- Sclerouveitis
- Serpiginous chorioretinitis
- Subacute anterior uveitis
- Subacute iritis
- Superficial scleritis
- Sympathetic uveitis
- Syphilitic chorioretinitis
- Syphilitic retinitis
- Toxocariasis
- Toxocariasis uveitis
- Toxoplasma neuroretinitis
- Toxoplasmosis
- Toxoplasmosis chorioretinitis
- Toxoplasmosis uveitis
- Tuberculous chorioretinitis
- Tuberculosis of eye
- Tuberculous chronic iridocyclitis
- Tuberculous uveitis
- Uveitic glaucoma
- Uveitis
- Uveitis due to secondary syphilis
- Uveitis glaucoma hyphema syndrome
- Uveitis related cystoid macular oedema
- Uveitis rheumatoid arthritis syndrome
- Viral retinitis



- Vitreous inflammation
- Vitreous inflammation - red reflex present
- Vogt-Koyanagi-Harada syndrome
- White dot syndrome
- Vitreous cells present

### **Vitreous opacities**

- Asteroid hyalosis
- Cholesterol crystals (Synchysis Scintillans)
- Synchysis scintillans
- Vitreous haemorrhage

### **Other co-pathology**

- Abscess of orbit
- Abscess of periorbital region
- Acantholytic actinic keratosis
- Achromic naevus
- Acquired blindness
- Acquired heterochromia or iris
- Acquired hypopigmentation of choroid
- Actinic keratosis of eyelid
- Acute mucopurulent conjunctivitis
- Acute zonal occult outer retinopathy
- Adenoma of non-pigmented epithelium of ciliary body
- Adenoma of pigmented epithelium of ciliary body
- Adhesions and disruptions of iris and ciliary body
- Adie's pupil
- Adverse reaction to oil
- Against-the-rule astigmatism
- Allergic conjunctivitis (disorder)
- Altitudinal hemianopia

- Amyloid of vitreous
- Amyloidosis (vitreous / retina)
- Anomalies of lens shape
- Anterior chamber fibrosis
- Anterior staphyloma
- Argyll Robertson pupil
- Astrocytic hamartoma
- Atrophic round hole in lattice retinal degeneration
- Atrophy of orbit
- Autoimmune retinopathy
- Basal cell carcinoma of lateral canthus
- Basal cell carcinoma of upper eyelid
- Basal cell carcinoma – primary
- Benign tumour of iris
- Binocular diplopia
- Bitemporal heteronymous quadrantanopia
- Blepharitis
- Candida endophthalmitis
- Candida retinitis
- Capillary haemangioma of eyelid
- Carcinoma in situ of choroid
- Carcinoma in situ of retina
- Cavernous haemangioma of retina
- Cellulitis
- Chorioretinal atrophy
- Chorioretinal tumour
- Choroid tumours of other origin
- Choroidal detachment
- Choroidal fold
- Choroidal lymphoma
- Choroidal melanoma
- Choroidal naevus

- Chronic postoperative endophthalmitis
- Ciliary staphyloma
- Coloboma of eyelid
- Combined hamartoma of retina and rpe
- Concentric fading of visual field
- Congenital folds of the posterior segment
- Congenital iris hypoplasia
- Congenital malformation of angle of anterior chamber of eye
- Conjunctivitis-allergic
- Conjunctivitis due to lichen planus
- Contact dermatitis
- Contact lens overwear syndrome
- Contact lens related disorder
- Crocodile tears syndrome
- Cyst
- Cyst of anterior chamber
- Cyst of ciliary body
- Cysticercosis of eye
- Deep anterior chamber
- Deep set eye
- Degenerative disorder of eyelid
- Degenerative disorders of eyelids and periocular area
- Demodectic blepharitis
- Diffuse episcleritis
- Diplopia
- Discoid lupus erythematosus
- Disorder of choroid of eye
- Disorder of vitreous body
- Disorder of vitreous cavity
- Duane retraction syndrome
- Duane retraction syndrome – atypical
- Duane retraction syndrome – typical

- Duane's syndrome, type 2
- Duane's syndrome, type 3
- Ectopic pupil
- Endogenous endophthalmitis
- Endogenous fungal endophthalmitis
- Endophthalmitis
- Enophthalmos due to orbital tissue atrophy
- Entropion from focal conjunctival scarring
- Epiblepharon
- Episcleritis
- Exudative retinal detachment
- Eyelid bruising
- Eyelid lesion
- Eyelid malposition
- Eyelid vascular anomalies
- Fibrosed anterior chamber
- Floppy eyelid syndrome
- Floppy iris syndrome
- Follicular conjunctivitis
- Foreign body on external eye
- Foreign body under eyelid
- Fungal endophthalmitis
- Generalised iris atrophy
- Granulomatous conjunctivitis
- Haemangioma of choroid
- Haemangioma of the conjunctiva/caruncle
- Hemianopia visual field defect
- Herpes zoster conjunctivitis
- Homonymous quadrant anopia
- Hydroxychloroquine adverse reaction
- Hydroxychloroquine toxic retinopathy
- Hyperaemia +

- Hyperaemia ++
- Hyperaemia +++
- Hypermetropia
- Inclusion conjunctivitis
- Infected eye socket
- Inflammation of orbit
- Internal hordeolum
- Intraocular haemorrhage
- Irregular astigmatism – lenticular
- Iridodonesis
- Iris bombe
- Iris capture
- Iris defect
- Iris prolapse
- Iris transillumination
- Jaw winking associated with ptosis
- Jaw-winking syndrome
- Juvenile xanthogranuloma of iris
- Keratitis
- Limbal dermoid of conjunctiva
- Linear IgA cicatrizing conjunctivitis
- Malignant medulloepithelioma of ciliary body
- Malignant melanoma of conjunctiva
- Malignant melanoma of eyelid
- Malignant melanoma of retina
- Malignant melanoma of skin of eyelid
- Malignant tumour of choroid
- Manifest hypermetropia
- Meibomian gland dysfunction of right eye
- Metastasis to eye of unknown primary
- Microphthalmos
- Monocular diplopia

- Mucin tear deficiency
- Mucous membrane pemphigoid
- Multiple evanescent white dot syndrome
- Naevus
- Nanophthalmos
- Negative dysphotopsia
- Neoplasm of choroid
- Neoplasm of ciliary body
- Neoplasm of uncertain behaviour of choroid
- Neoplasm of uncertain behaviour of conjunctiva
- Neoplasm of uncertain behaviour of orbit
- Neoplasm of uncertain behaviour of skin of eyelid
- Non-chemical burn of eyelid AND/OR periocular area
- Ocular albinism
- Ocular mucous membrane syndrome
- Ocular surface disease
- Orbital deformity due to surgery
- Orbital haemorrhage
- Orbital lump
- Orbital oedema
- Osteoma of orbit
- Pain due to any device, implant AND/OR graft
- Papillary conjunctivitis
- Paralytic ectropion
- Partial hypoplasia of optic disc
- Pathological hypermetropia
- Paving stone degeneration
- Peripapillary choroidal sclerosis
- Peripheral chorioretinal scars
- Peripheral scar of posterior pole of eye
- Phlyctenular conjunctivitis
- Photoreceptor degeneration

- Posterior lid margin disease
- Posterior vitreous detachment
- Posterior vitreous detachment - crinkled posterior hyaloid visible
- Posterior vitreous detachment – uncertain
- Posterior vitreous detachment - Weiss ring visible
- Posterior vitreous detachment with Weiss ring
- Post-operative endophthalmitis
- Postsurgical retinal scar
- Precancerous melanosis
- Primary malignant neoplasm of ciliary body
- Pupil irregular (finding)
- Pupillary disorder
- Pupillary paralysis
- Pyogranulomatous conjunctivitis
- Refractive diplopia
- Retinal cyst
- Retinal pigment epithelial adenocarcinoma
- Retinal round hole without detachment
- Retinochoroidal coloboma
- Retroperitoneal haematoma
- Ring melanoma of ciliary body
- Ring staphyloma
- Rosacea blepharoconjunctivitis
- Scleral melt
- Scleral staphyloma
- Sclerochoroidal calcification
- Scleromalacia perforans
- Secluded pupil
- Secondary pigmentary retinal degeneration
- Sector shaped iris atrophy
- Senile ectropion
- Shallow anterior chamber of eye (finding)

- Shallow Anterior Chamber: iris-cornea touch
- Shallow palpebral fissure
- Snail-track retinal degeneration
- Spastic entropion
- Specified anomalies of choroid
- Staphylococcal eye infection
- Sterile endophthalmitis
- Steroid induced
- Sturge-Weber syndrome
- Subconjunctival cyst
- Subretinal lesion (finding)
- Suprachoroidal haemorrhage
- Synchrony scintillans
- Tamsulosin associated floppy iris syndrome
- Tears of iris stroma
- Trachoma
- Toxic conjunctivitis
- Tuberculosis of conjunctiva
- Tumour of iris
- Viral conjunctivitis
- Vitamin A deficiency with xerophthalmia
- Vitreoretinal tuft
- Vitreous degeneration
- Vitreous floaters
- Vitreous membranes
- Vitreous pigment cells (finding)