

PROTOCOL GUIDE



Clinic Protocol Guide
Updated September 2020



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OVERVIEW

Infection prevention and control measures are an important part of OneSight's mission and values, starting in our clinics and vision centers around the world. To prepare for the eventual and safe return to its work, OneSight has implemented new hygiene guidelines and clinic protocols.

Every volunteer must sign a release form before they attend the clinic.

Disclaimer: These are OneSight's protocols; however, local legislation and requirements must be met at a minimum.

GENERAL HYGIENE PROTOCOLS

Personal Protective Equipment (PPE)

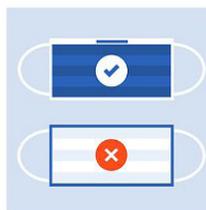
Masks

- You could spread COVID-19 to others even if you do not feel sick.
- The cloth face cover is meant to protect other people in case you are infected. Cloth face masks must be washed with soap and water daily after the clinic if you are using the same mask the next day.
- Everyone at the clinic will need to keep masks on throughout the clinic. (This includes patients, volunteers and OneSight staff.)
- Mask must cover nose and mouth.
- Doctors should use an N95 or equivalent KN95 mask, or surgical mask if those are not available.
- Clinic attendees who are not doctors do not need to use an N95 mask or equivalent. A cloth face cover is sufficient.
- Should a patient arrive at the clinic without a face mask, one needs to be provided to him/her.

HOW TO WEAR A MASK



WASH YOUR HANDS BEFORE WEARING A MASK



ENSURE THE COLORED SIDE FACING OUT



SECURE THE STRINGS AROUND YOUR EARS



FIX THE METALLIC STRIP TO FIT OF THE SHAPE OF THE NOSE



STRETCHING THE MASK TO COVER YOUR CHIN



DO NOT TOUCH THE MASK WHILE USING IT



REMOVE THE MASK FROM BEHIND BY HOLDING THE STRINGS WITH HANDS



TOUCHING PUT THE MASK IN THE TRASH WITHOUT TOUCHING THE FRONT

Video: How to make a face shield >>

<https://www.youtube.com/watch?v=6PHyM4sbZmQ>

Guidelines: Face Cloth Covering Guidelines from CDC >>

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Clothing

- Clothing options have been considered to ensure volunteers have clean/hygienic clothing daily, which may include volunteers wearing their own clothing.
- Clothing worn during clinic must not be worn on subsequent days without laundering.

Gloves

Gloves must be worn by the doctor or volunteer when directly touching the patient.

HOW TO PROPERLY PUT ON GLOVES

Understanding the proper way to put on and take off your disposable gloves is the final step to ensuring that your gloves are providing the optimum protection for you and your guests.

Although this process may seem straightforward, we want to remind you of some key tips to make sure that your gloves are being used to the best of their ability.

- The absolute key when dealing with gloves and putting them on is cleanliness.
 - You should put on your gloves in a clean area with clean hands. You should not be contaminating your gloves by placing them on a dirty surface.
- Remove all watches, rings and other jewelry from your hands before putting on your gloves. This is taking an extra step of precaution to prevent any accidental rips or tears in the glove.
- In order to preserve the cleanliness of the glove, attempt to not touch the outside of the glove as you put it on. An easy way to do this is to first put the glove on your dominant hand, while touching it as little as possible. Then, put the other glove on your non-dominant hand, using your gloved dominant hand to pull it on. Once both gloves are on your hands, you can adjust your fingers and the fit of the glove.

HOW TO PROPERLY REMOVE GLOVES



1 Grasp the outside of one glove at the wrist. Do not touch your bare skin.



2 Peel the glove away from your body, pulling it inside out.



3 Hold the glove you just removed in your gloved hand.



4 Peel off the second glove by putting your fingers inside the glove at the top of your wrist.



5 Turn the second glove inside out while pulling it away from your body, leaving the first glove inside the second.



6 Dispose of the gloves safely. Do not reuse the gloves.



7 Clean your hands immediately after removing gloves.

Hand Washing

- Wash or sanitize your hands after each patient encounter, whether you are wearing gloves or not. Wash your hands with soap and water for at least 20 seconds, especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid touching your eyes, nose, and mouth with unwashed hands



Wet your hands



Apply soap



Palm to palm



Palm to palm fingers interlaced



Back of the hand



Base of thumbs



Wash fingernails



Rinse hands



Dry hands with towel

Social Distancing

- Stay at least 6 feet/1-2 meters (about 2 arms' length) from other people.
- Do not gather in groups.
- Stay out of crowded places and avoid mass gatherings.
- Clinic location must have sufficient space to accommodate social distancing, inclusive of waiting areas (for example, a covered car parking area).

CLINIC & PATIENT FLOW PROTOCOLS

1. Volunteer/Team Member Safety

- If you are sick, please stay home!
- Inform your Program Manager if you have been exposed to anyone who has tested positive for COVID-19 in the past 14 days.
- If you have a high-risk condition it is best you stay home, as your health and safety come first.
- Hands should be washed with soap and water for 20 seconds or sanitized with an alcohol-based (60% minimum) hand sanitizer.
- Patients should wash/sanitize hands upon arrival.
- Use disposable gloves. In cases where it is not possible to use a new pair of disposable gloves after each patient, wash hands after each patient. When examining the eyelids, hands should still be washed before and after use of disposable gloves with clean water and soap, or sanitized.
- Cover the mouth and nose with either a cloth face cover (general volunteers) or an N95 or surgical mask (doctors) when consulting, as certain tests are done at a very close facial distance.
- Safety glasses and face shields should be worn during procedures where there is a potential of airborne infections.
- When seeing patients, both optometric personnel and volunteers must avoid touching their faces including mouth, nose and eyes.
- Enclosed footwear should be worn for protection from injury and sharp objects.
- Immunization of both optometric personnel and general volunteers should be done yearly. Immunizations must be up to date for the country to which you are traveling.
- Avoid crowding in the dispensing, waiting or consulting rooms. Try to ensure a 6 feet (2 meter) distance between people whenever possible.
- Avoid wearing jewelry
- Limit the number of items you bring with you to the clinic

2. Clinic Preparation

- Thoroughly clean the clinic space.
- Wipe down all surfaces with disinfectant.
- Place hand sanitizer in prominent places.
- Post signage promoting frequent hand washing.
- Identify a room or area where someone who is feeling unwell or has symptoms can be safely isolated if they are unable to leave the premises immediately.
- Open windows and doors whenever possible to make sure the venue is well ventilated.
- Venue should be free of curtains and/or air-conditioning. If there is air-conditioning, it should be turned off.
- Venue needs to have one entry and one exit point with controlled access and egress.

3. Modifications to Clinic Flow

- One patient is permitted per station at a time.
- Only the patient will be allowed to enter the clinic.
 - Exceptions are parent or guardian with child and/or an assistant, if medically necessary.
- Hygiene protocols detailed below must be followed between each patient or additionally on an as-needed basis
- **Triage (station added for COVID-19 response clinic)**
COVID-19 Questionnaire administered
 - Have you come into close contact (within 6 feet) with someone who has received a laboratory-confirmed COVID-19 diagnosis in the last 14 days?
 - Have you been out of the state or country within the last 14 days?
 - Do you have any of the following:
 - Fever
 - Sore throat
 - Itchy or red eyes (conjunctivitis)
 - Chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Body aches
 - Headaches
 - Loss of sense of smell or taste
 - If no, proceed with temperature check (a fever is anything over 100.4°F / 38°C)
 - If yes, refer to medical specialist provided by charitable partner
- **Pre-Registration Waiting Area (station added for COVID-19 response clinic)**
5-10 chairs spaced 6 feet / 1-2 meters apart
 - Can be adjusted according to space (minimum of approximately 6 feet / 1-2 meters apart)

Standard OneSight Charitable Clinic Stations

- | | |
|-----------------------|---------------------|
| 1. Registration | 8. Eye Health |
| 2. Visual Acuity | 9. Refraction |
| 3. Color Vision | 10. Control |
| 4. Depth Perception | 11. Frame Selection |
| 5. Pupillary Distance | 12. Dispensing |
| 6. Auto-Refraction | |
| 7. Tonometry | |
- * Manufacturing is a non-patient traffic area. Social distancing and disinfection protocols must be followed.

COVID-19 Sample Clinic Station Breakdown

(Example is four lane charitable clinic, seeing 40-80 students in a six-hour day or 60-120 adults in an eight-hour day)

| Station | Team | Time | | | Tech | |
|--|--------------|---------------|--------------|------------|---------|---------|
| | Team Members | Cleaning Time | Station Time | Total Time | Tablets | Laptops |
| COVID-19 Triage - Questionnaire, Health Check, PPE Distribution (outside the clinic) | 1 | 0 | 2 | 2 | 0 | 0 |
| Waiting Area (outside if possible) | 1 | 0 | 5 | 5 | 0 | 0 |
| Registration | 2 | 0 | 5 | 5 | 0 | 2 |
| Visual Acutities | 1 | 0 | 5 | 5 | 1 | 0 |
| Color & Depth | 1 | 1 | 4 | 5 | 1 | 0 |
| Tonometry | 1 | 1 | 2 | 3 | 1 | 0 |
| Dilation & Neutralization | 1 | 0 | 10 | 10 | 1 | 0 |
| Auto-Refracton | 1 | 1 | 3 | 4 | 1 | 0 |
| Eye Health | 2 | 1 | 4 | 5 | 1 | 0 |
| Refraction | 4 | 1 | 9 | 10 | 4 | 0 |
| Control Station (Referral Letter) | 1 | 0 | 1 | 1 | 0 | 1 |
| Frame Selection & Measurements | 2 | 3 | 5 | 8 | 2 | 0 |
| Readers & Sun | 1 | 3 | 2 | 5 | 1 | 0 |
| Inside Lab | 4 | 0 | 10 | 10 | 0 | 3 |
| Dispensing on Site | 2 | 1 | 3 | 4 | 2 | 0 |
| Leadership Team | 3 | 0 | 0 | 0 | 0 | 0 |
| Totals | 28 | 12 | 70 | 82 | 15 | 6 |
| | | | | | | |
| | | | | | | |

4. Technology

It's very important that we do not use water when cleaning tablets or keyboards as it can damage the device. Apple has stated that it is safe to use disinfectant wipes (such as Clorox, Lysol, or PDI Sani Wipes) to clean and disinfect the screen. Regarding keyboards, it has been proven to be safe to use either disinfectant wipes or PDI Sani Wipes. When disinfecting, it is important that the screen or keyboard is wiped first with a microfiber cloth (such as a lens cloth) to get any dust or dirt particles off. This will ensure the device remains clean and working before disinfecting. Disinfectant spray may be used IF it is sprayed on to a cloth first and not on to the screen, keyboard, or mouse directly.

The following should be the process of cleaning and disinfecting an iPad screen, keyboards, mice, and printers. This process should take place anytime a user is done using the device, wipes their face, or sneezes/coughs.

1. Wipe the device down with a microfiber cloth. Ensure as much dust and dirt are removed as possible.



2. Wipe the device with a disinfectant wipe, PDI Sani Wipe, or cloth sprayed with disinfectant spray



3. DO NOT re-use the same disinfectant wipe.

Additional Recommendations

In addition to cleaning down the device after use, there are a few other steps that could increase the safety of participants during clinic.

- Each user is assigned one single device to use through the day. Even if the associate is working VA in the morning and frame selection in the afternoon, they are able to use the same iPad throughout the day as long as it remains charged. This should also apply for anyone working a station with a laptop or printer. If an associate is working registration or dispense, they should remain on that station for the entire day.
- Disposable gloves (latex and vinyl) can be used and will help with keeping dirt and germs off of iPads and keyboards. Although it may be harder to type on a touchscreen, it definitely provides an extra layer of safety.
- If handing off a device is absolutely necessary, ensure that the device is cleaned well with the steps found earlier.

5. Equipment Cleaning Protocol

- Team members at each station will be responsible for carrying out the correct hygiene control and cleaning.
- Covers must be placed on all equipment, e.g. phoropter, slit lamp, auto-refractor and tonometer, during lunch and at end of day.
- Clean the phoropter, slit lamp, auto-refractor and tonometer with clean cloth and clean water with disinfectant that has at least 60% alcohol.
- Sterilize the forehead rest and chinrest on all equipment immediately after every patient, including the PD meter, with cotton wool pad and 60% alcohol-based disinfectant or sterile swabs.

6. Station by Station Protocol

| Station or Equipment | Cleaning Procedure | Responsible Person |
|-------------------------------|---|--|
| Clinic Entrance | <ul style="list-style-type: none"> • Continually clean thermometer | Volunteer/Team Member stationed at entry |
| Pre-Registration Waiting Area | <ul style="list-style-type: none"> • Continual disinfection of seats used by patients • Maintain seating area to accommodate social distancing | Volunteer/Team Member |
| Registration | <ul style="list-style-type: none"> • Continual disinfection of work area and registration computers used by volunteer/team member • Maintain seating area to accommodate social distancing | Volunteer/Team Member |
| Visual Acuity (VA) | <ul style="list-style-type: none"> • Patient sanitizes hands with sanitizer • Maintain social distancing in line by following markings on floor | Volunteer/Team Member |
| Color Vision | <ul style="list-style-type: none"> • Continual disinfection of work area and seating • Patient does not touch book • Maintain social distancing in line by following markings on floor | Volunteer/Team Member |
| Depth Perception | <ul style="list-style-type: none"> • Continual disinfection of work area and seating • Patient does not touch book • Maintain social distancing in line by following markings on floor | Volunteer/Team Member |

| | | |
|---|--|------------------------------|
| <p>Pupillary Distance (PD)</p> <p>Equipment used: Pupilometer</p> | <ul style="list-style-type: none"> • Use a 60% alcohol-based solution for disinfecting between patients (ensure solution is dry before using for next patient) • Continual cleaning of exterior of pupilometer • Maintain social distancing in line by following markings on floor | <p>Volunteer/Team Member</p> |
| <p>Auto-Refractor</p> | <ul style="list-style-type: none"> • Use disposable or food-handler gloves • Clean the body with clean dry cloth moistened with water and 60% alcohol disinfectant • Clean the chinrest and forehead rest with cotton wool pad and sterile swabs before and after use. • Maintain social distancing in line by following markings on floor | <p>Optometric Personnel</p> |
| <p>Tonometry</p> <p>Use Non-Contact Tonometer whenever possible</p> | <ul style="list-style-type: none"> • Use surgical gloves • Clean the instrument with clean, dry cloth, moistened with water and household detergent • Clean the chinrest and forehead rest with cotton wool pad and 60% alcohol disinfectant or sterile swabs before and after use • If using contact tonometry, probe must be changed after each patient - this is mandatory • Maintain social distancing in line by following markings on floor | <p>Optometric Personnel</p> |
| <p>Eye Health includes:</p> <ul style="list-style-type: none"> • Administering dilation drops • Angle Closure • Muscle balance • Ophthalmoscope | <ul style="list-style-type: none"> • Volunteer/Doctor Team members must wear gloves • DO NOT TOUCH EYE OR EYE LIDS WITH DROPPER BOTTLE • Utilize scope shield on ophthalmoscope • Maintain seating area to accommodate social distancing | <p>Volunteer/Doctor</p> |
| <p>Diagnostic Set and PD meter</p> | <ul style="list-style-type: none"> • Clean both the ophthalmoscope and retinoscope head and handle with clean, dry cloth moistened with 90% alcohol-based disinfectant • Clean the PD meter forehead rest and body with cotton wool pad and alcohol-based disinfectant | <p>Optometric Personnel</p> |
| <p>Phoropter</p> | <ul style="list-style-type: none"> • Use disposable or food-handler gloves • Clean the front and handles with clean, dry cloth moistened with 60% alcohol-based disinfectant • Clean the forehead rest with cotton wool pad and sterile swabs before and after use | <p>Optometric Personnel</p> |

| | | |
|--|---|--------------------------------------|
| Slit Lamp | <ul style="list-style-type: none"> Remove the dust accumulation from the mirrors with a camel hairbrush; after brushing, finger marks can be removed, if necessary; use with cotton wool pad and 60% alcohol-based disinfectant; extreme care must be taken so as to not damage delicate mirrored surfaces Clean the exterior surfaces with clean cloth moistened with 60% alcohol-based disinfectant Clean the chinrest and forehead rest with cotton wool pad and 60% alcohol-based solution or sterile swabs before and after use | Cleaners Optometric Personnel |
| Trial Frame and Lenses | <ul style="list-style-type: none"> Wear disposable gloves Clean all lenses and the trial frame at the beginning of the day Clean the lenses separately with lens cleaning cloth and solution Sterilize the trial frame with clean, dry cloth moistened with 60% alcohol-based disinfectant before and after use | Optometric Personnel |
| Frames Selection | <ul style="list-style-type: none"> Wear disposable gloves Clean the frames at the beginning of the day with clean, dry cloth and 60% alcohol-based disinfectant Continuously clean frames chosen by patients from the display before putting them back See Section 6 | Volunteer/Team Member |
| Screens/Visi-Chart | <ul style="list-style-type: none"> Clean all screens (e.g. on auto-refractor, tonometer, PD meter, wall-mounted) with a clean, dry cloth moistened with 60% alcohol-based disinfectant | Volunteer/Team Member |
| Vertometer/Lensometer | <ul style="list-style-type: none"> Brush dust off the surface of the lenses on the vertometer with a dust brush Wipe the exterior with clean, dry cloth moistened with 60% alcohol-based disinfectant to prevent dust accumulation Cover the vertometer when not in use | Volunteer/Team Member |
| General Items Tablets and Computers | <ul style="list-style-type: none"> Tablet screens and computer keyboards should be wiped with a clean dry cloth, followed with a disinfectant wipe or a cloth lightly dampened with disinfectant spray. | Volunteer/Team Member |

7. Frame Selection Protocol

- Create multiple stations for frame selection that will accommodate any patient (each station has women's, men's and children's frames)
- Each station will have frame disinfection available
 - One part 3% Hydrogen Peroxide mixed with five parts water in a spray bottle will disinfect frames

8. Monitoring protocols

OneSight Program Manager or other Clinic Leader will monitor the entire clinic to ensure protocols are being followed, including but not limited to:

- Administering COVID-19 Questionnaire and temperature check at entrance to every person that enters (patients, volunteers and visitors)
- Proper understanding of protocols
- Use of PPE
- Cleanliness and hygiene of clinic
- Protective shields in use

9. Supplies & Logistics

- Pre-order sufficient supplies and materials, including tissues and hand sanitizer for all participants, and surgical masks for doctors.
- All items sit for 24 hours after delivery. Exterior of PODs and any equipment cases (plastic and steel containers) must be wiped down with disinfectant when the shipment is unpacked, 24 hours after receipt.

Each Program Manager must fill in supply list and quantity required for their clinic:

| Supplies | Quantity |
|--|-----------------|
| Normal Clinic Supplies | |
| Disinfection Wipes | |
| Probes for iCare Tonometer (1 p/p) | |
| Plastic Tape | |
| 60% Isopropyl Alcohol Wipes | |
| Alcohol Bottles, Alcohol and Cotton Pads | |
| Safety Glasses/Shields for all Stations | |
| Measuring Tape and Tapes for Social Distancing | |
| Gloves (Disposable) | |
| Hand Sanitizer | |
| COVID-19 Clinic Specific Supplies | |
| Kaleidos Sanitary Disposable Face Covers (1 p/p) | |
| Clip Boards | |
| Sanitary Face Shield for Phoropter | |
| Masks (N95) | |
| Masks (Disposable) | |
| Non-Contact Digital Infrared Thermometer | |
| Face Shields | |
| Cleaning Supplies (Mops, Cloths & Disinfectant) | |
| Hydrogen Peroxide | |
| Disposable Pens | |
| Yellow Safety Tape | |
| Laminated 6' Marking Squares | |
| Hand Soap | |
| Slit Lamp Barrier | |
| Retinoscope Barrier Sheet | |
| Red & Green Trays for Frame Disinfection | |
| Spray Bottles for Frame Disinfection | |
| Cloth Gown/Surgical Cap | |
| 6' Long Strings | |

1. Hand Washing



2. How to wear gloves properly

Properly put on your Gloves

Understanding the proper way to put on and take off your nitrile gloves is the final step to ensuring that your gloves are providing the optimum protection for you and your guests.

Although this process may seem straightforward, we want to remind you of some key tips to make sure that your gloves are being used to the best of their ability.

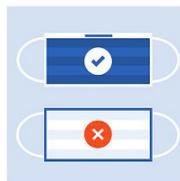
- The absolute key when dealing with gloves and putting them on, is cleanliness.
 - You should put on your gloves in a clean area with clean hands. You should not be contaminating your gloves by placing them on a dirty surface.
- Remove all watches, rings and other jewelry from your hands before putting on your gloves. This is taking an extra step of precaution to prevent any accidental rips or tears in the glove.
- In order to preserve the cleanliness of the glove, attempt to not touch the outside of the glove as you put them on. An easy way to do this is first put the nitrile glove on your dominant hand, while touching it as little as possible. Then, put the other glove on your non-dominant hand, using your gloved dominant hand to pull it on. Once both gloves are on your hands you can adjust your fingers and the fit of the glove.



3. Use of Face Mask



WASH YOUR HANDS BEFORE WEARING A MASK



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PUT THE MASK IN THE TRASH WITHOUT TOUCHING THE FRONT

Video on how to make a face shield -

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Face Cloth Covering Guidelines from CDC -

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ANNEXURE

Covid 19 station breakdown (*example is 4 lane charitable clinic)

4 Lane POD

| | |
|---------------------------|------------------------------------|
| COVID 19 | ≥40-80 Students (6 hour day) |
| US REGIONAL 1 day CLINICS | ≥56-112 Adults & Kids (8 hour day) |

COVID 19 Triage (Questionnaire, Health Check, PPE distribution) outside the clinic

| | |
|---|---|
| Core Team Number: | 1 |
| Time per Station: | 2 |
| Time lapse per patient (cleaning equipment) | 0 |
| Number of Laptops: | 0 |

Patient Standby-Control Station outside clinic if possible

| | |
|---|---|
| Core Team Number: | 1 |
| Time per Station: | 5 |
| Time lapse per patient (cleaning equipment) | 0 |
| Number of Laptops: | 0 |

Registration

| | |
|---|---|
| Core Team Number: | 2 |
| Time per Station: | 5 |
| Time lapse per patient (cleaning equipment) | 0 |
| Number of Laptops: | 2 |

Visual Acuities 1 Chart

| | |
|---|---|
| Core Team Number: | 1 |
| Time per Station: | 5 |
| Time lapse per patient (cleaning equipment) | 0 |
| Number of Tablets: | 1 |

Color & Depth (US ONLY)

| | |
|---|---|
| Core Team Number: | 1 |
| Time per Station: | 4 |
| Time lapse per patient (cleaning equipment) | 1 |
| Number of Tablets: | 1 |

Tonometry (at least 1 optician)

| | |
|---|---|
| Core Team Number: | 1 |
| Time per Station: | 2 |
| Time lapse per patient (cleaning equipment) | 1 |
| Number of Tablets: | 1 |

Dilation & Neuturalization (at least 1 optician)

| | |
|---|----|
| Core Team Number: | 1 |
| Time per Station: | 10 |
| Time lapse per patient (cleaning equipment) | 0 |
| Number of Tablets: | 1 |

Auto Refraction

| | |
|---|---|
| Core Team Number: | 1 |
| Time per Station: | 3 |
| Time lapse per patient (cleaning equipment) | 1 |
| Number of Tablets: | 1 |

Eye Health

| | |
|---|---|
| OD Number: | 2 |
| Time per Station: | 4 |
| Time lapse per patient (cleaning equipment) | 1 |
| Number of Tablets: | 1 |

Refraction

| | |
|---|---|
| OD Number: | 4 |
| Time per Station: | 9 |
| Time lapse per patient (cleaning equipment) | 1 |
| Number of Tablets: | 4 |

Controller Station (Referral Letter - US ONLY)

| | |
|---|---|
| Core Team Number: | 1 |
| Time per Station: | 1 |
| Time lapse per patient (cleaning equipment) | 0 |
| Number of Laptops: | 1 |

| Frame Selection + Measurements (at least 1 optician) | |
|--|----|
| Core Team Number: | 2 |
| Time per Station: | 5 |
| Time lapse per patient (cleaning equipment) | 3 |
| Number of Tablets: | 2 |
| Readers & Sun (ADULT CLINICS ONLY) | |
| Core Team Number: | 1 |
| Time per Station: | 2 |
| Time lapse per patient (cleaning equipment) | 3 |
| Number of Tablets: | 1 |
| Inside Lab (at least 1 optician, Mfg Captain & Inventory Captain) | |
| Core Team Number: | 4 |
| Time per Station: | 10 |
| Time lapse per patient (cleaning equipment) | 0 |
| Number of Laptops: | 3 |
| Dispensing on site (at least 1 optician) | |
| Core Team Number: | 2 |
| Time per Station: | 3 |
| Time lapse per patient (cleaning equipment) | 1 |
| Number of Tablets: | 2 |
| TOTALS | |
| Core Team Number: | 23 |
| Time per Station: | 63 |
| Number of Laptops: | 6 |
| Time lapse per patient (cleaning equipment) | 12 |
| Number of Tablets: | 15 |
| Added Leadership Team: | 3 |
| Total Time for Patient | 75 |
| Core Team Size Total (Adult Clinic) | 26 |
| Core Team Size Total (No Adults) | 25 |