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# Analysis of the Pacific University College of Optometry patient care concern forms

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# Analysis of the Pacific University College of Optometry patient care concern forms

## **Abstract**

In January of 1982 the Pacific University College of Optometry adopted a patient complaint system. This allowed patients a medium by which to air their grievances, and the entire clinical personnel to see first hand their short comings. Over the past thirty seven months 22,877 patients have filed 266 Patient Care Concern Forms. That is roughly one complaint per every one hundred patients. While not every patient was cognizant of the system, many took advantage of it. The complaints, while very broad, can be broken into four categories. They are errors in prescribing, errors in dispensing, errors in the realm of contact lenses, and miscellaneous errors.

## **Degree Type**

Thesis

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ANALYSIS OF THE PACIFIC UNIVERSITY  
COLLEGE OF OPTOMETRY  
PATIENT CARE CONCERN FORMS

PRESENTED TO:

THE FACULTY OF THE COLLEGE OF OPTOMETRY  
PACIFIC UNIVERSITY

IN PARTIAL FULFILLMENT OF THE REQUIREMENTS  
FOR THE DEGREE: DOCTOR OF OPTOMETRY

BY: MARK <sup>1</sup>          KONYN  
MAY, 1985

Accepted by the faculty of the College of  
Optometry, Pacific University, in partial  
fulfillment of the requirements for the Doctor  
of Optometry Degree.

 Richard D. Repton Director of Thesis

ABSTRACT:

In January of 1982 the Pacific University College of Optometry adopted a patient complaint system. This allowed patients a medium by which to air their grievances, and the entire clinical personnel to see first hand their shortcomings. Over the past thirty seven months 22,877 patients have filed 266 Patient Care Concern Forms. That is roughly one complaint per every one hundred patients. While not every patient was cognizant of the system, many took advantage of it.

The complaints, while very broad, can be broken into four categories. They are errors in prescribing, errors in dispensing, errors in the realm of contact lenses, and miscellaneous errors.

## INTRODUCTION:

Any business's success is proportional to how well it handles those with whom it deals. The optometric profession is a prime example. Like any businessman, the optometrist should be constantly monitoring himself to ensure that patients under his care are receiving the best treatment possible. This includes determining not only what is being done correctly but also what is being done erroneously. As the old adage goes, bad news spreads faster than good.

In 1981 William O. Richardson<sup>1</sup> proposed a model for patient complaints for the Pacific University College of Optometry. Thereafter, on 1 January 1982 the Pacific University College of Optometry instituted a formal patient complaint system. The complaining patient was asked to write his problem on a Patient Care Complaint Form. The intern fielding the complaint then would describe on the form what steps were taken to solve the problem. Copies of the complaint would be sent to the intern whom was responsible for the incident, the original advisor, and to the head of the clinic.

Over the last thirty seven months, 22,877 people have passed through Pacific's two general clinics; of this total, 266 have filed complaints. The purpose of this paper is to show which areas of clinical optometry have caused the most problems.

In a thorough search of the literature, only two sources were found describing how two optometric Institutions had established a quality control system.<sup>1,2</sup> No follow up reports were cited in the literature.

#### METHOD:

Patient Care Concern Forms were collected up to the end of February 1985. Once collected, the complaints were read and categorized into three main areas. These are "prescribing errors", "dispensing errors", "contact lens errors", and "other". These major sections were further subdivided into parts, each dictated by the kind of complaint.

The Patient Care Concern Forms were gathered from Pacific's general clinic populations in Forest Grove and Portland.

#### DATA AND ANALYSIS:

Since the Patient Care Concern Form was instituted 22,877 patients have lodged 266 complaints, which breaks down to 1.16% of the patients were dissatisfied enough to lodge a formal complaint. Table 1 shows a tally of complaints organized according to the four main categories, and their respective parts. Graph [A] is a summation of all errors. It is broken down into the four major areas of errors with male complaints in clear and female complaints represented by the checked areas.

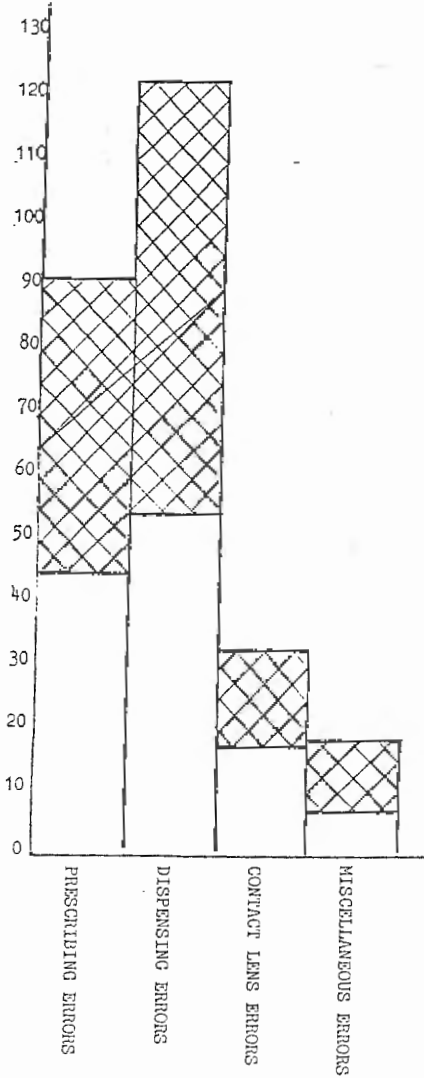
Prescribing errors accounted for 34.6% of patient complaints, and can be seen in Graph [B]. There were 47 female and 45 male complaints. In no area was there a significant sexual preference for complaint. The largest number of prescribing errors was due to patients being over plussed in their far prescription. This is the largest single section of complaint.



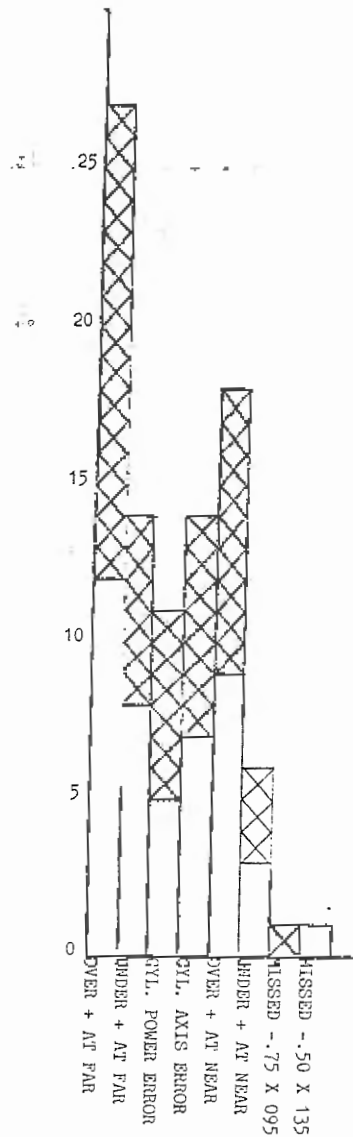
TABLE 1: PATIENT CARE CONCERN FORM TABULATION

ERROR	MALE	FEMALE	%
<u>PRESCRIBING</u>	<u>45</u>	<u>47</u>	<u>34.6</u>
Over plusseḍ far sphere power	12	15	
Under plusseḍ far sphere power	8	6	
Cylinder power error	5	6	
Cylinder axis error	7	7	
Over plusseḍ near add power	9	9	
Under plusseḍ near add power	3	3	
Missed uncovering $-.75 \times 095$	-	1	
Missed uncovering $-.50 \times 135$	1	-	
<u>DISPENSING</u>	<u>54</u>	<u>69</u>	<u>46.2</u>
Far PD error	-	1	
Seg ordered too high	7	8	
Seg ordered too low	9	11	
Wrong type add ordered	6	9	
Progressive add could not be worn	3	4	
Unwanted prism induced	1	1	
Prism was not ordered	1	-	
Wrong size lens ordered	2	3	
Wrong lens material ordered	2	5	
Wrong spectacle base curve ordered	1	1	
Different seg heights ordered	-	1	
Tint ordered too light	-	2	
Tint ordered too dark	-	2	
Wrong color tint ordered	-	3	
Wrong frame ordered	2	4	
Wrong temple length ordered	1	2	
Wrong bridge size ordered	1	-	
Broke/chipped lens	1	3	
Broke/scratched temple	1	1	
Broke nose pad	2	-	
Order never processed	1	1	
Dispensing intern was rude	-	1	
Transcribing error	13	6	
<u>CONTACT LENSES</u>	<u>17</u>	<u>16</u>	<u>12.4</u>
Wrong base curve	4	1	
Wrong type lens ordered	1	3	
Wrong power	2	3	
Wrong parameter	3	3	
Wrong color	-	1	
Modification error	-	2	
Contact lens could not be worn	-	1	
Contact lens not in vial	1	-	
Intern lost contact lens	1	-	
Contact lens was warped	2	1	
Patient could not attend F/U session	2	-	
Wrong price quote	-	1	
Patient given outdated solutions	1	-	
<u>MISCELLANEOUS</u>	<u>7</u>	<u>11</u>	<u>6.8</u>
Lab mistake not caught at verification	5	6	
Given $\frac{1}{2}$ exam, billed for complete one	-	1	
Switched eye care after $\frac{1}{2}$ of exam	-	1	
Eye exam took too long	-	1	
Glasses took too long to return from the lab	1	-	
Given lenses during diabetic changes	-	1	
Changed mind after ordering frame	-	1	
Did not like services received	1	-	

GRAPH [A] THE FOUR MAIN ERROR GROUPS



GRAPH [B] PRESCRIBING ERRORS



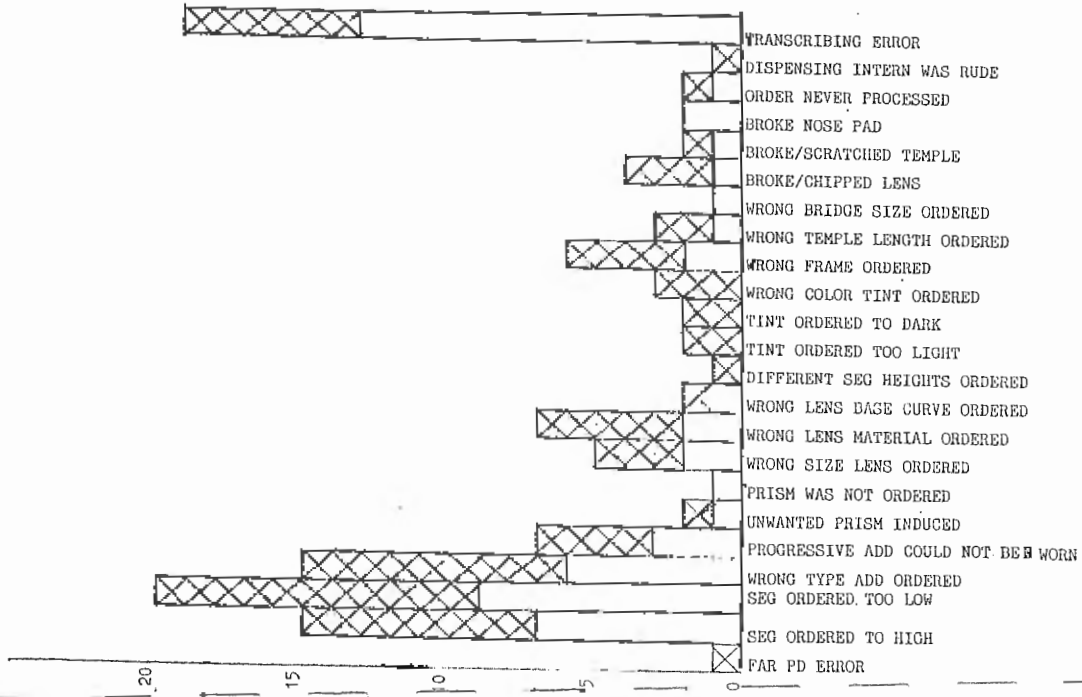
Twenty five complaints were registered due to an inaccurate astigmatic measurement. Eleven were from wrong cylinder power measurements, and the other fourteen were from an intolerable axis placement. The final area of concern in the prescribing arena is in the determination of a patients' near add power. Over plussing the add hailed eighteen complaints, which is three times the number of complaints reported for under plussing the near add power. There was one case where an intern missed revealing  $-.75 \times 095$  and another where  $-.50 \times 135$  was missed in the refraction.

Dispensing errors accounted for 46.2% of the complaints filed. Dispensing errors are where the most numerous amount of complaints were received. They are broken down further in Graph [C]. The most frequent problem was in the incorrect placement of the seg height. The seg was placed too high in fifteen instances and too low in another twenty cases. No one sex showed an overwhelming preference for seg height placement. Fifteen instances were reported where the patient was unhappy with the type of add ordered. Moreover, there were seven patients who rejected wearing a progressive add. Female patients filed all seven complaints pertaining to lens tinting. The last main area of complaints is due to interns' erring while transcribing the patients lens prescription onto the order form. There were a total of nineteen such cases.

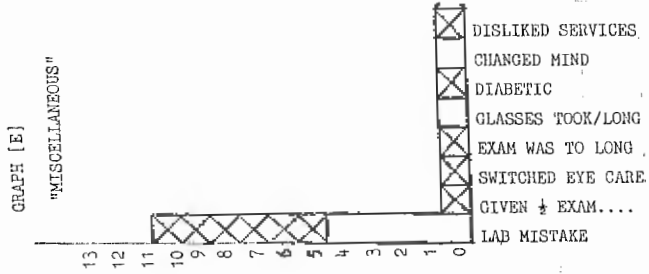
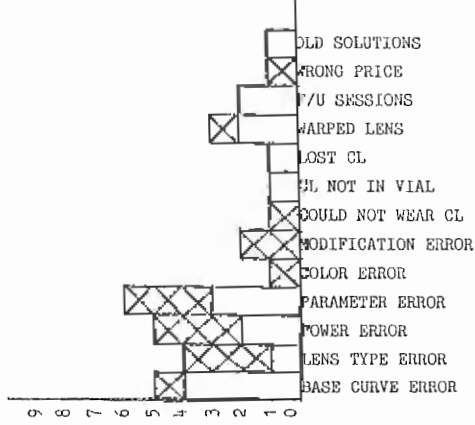
Of the 266 complaints registered, only thirty three were due to contact lenses. These are listed in Graph [D]. The largest category was that the wrong contact lens parameters were ordered. There were just six. A wrong parameter constitutes an erroneous lens size, optical zone size, peripheral curve dimensions, blends, and center thickness. There were five specific complaints pertaining to the wrong base curve being ordered. The remaining nineteen complaints were associated with eleven other various factors. There was no record kept of the number of contact lens patients which were seen during the thirty seven months of information gathering. Furthermore, when an error in the contact lens field was made, the patient or responding intern did not specify whether they wore hard, soft, extended wear, or gas permeable lenses.

There were eighteen complaints which have been designated as "miscellaneous". Graph [E] shows the individual areas. The largest group here were that laboratory errors that were not caught upon lens verification.

GRAPH (S) DISPENSING ERRORS



GRAPH (D) CONTACT LENS ERRORS



CONCLUSION:

Roughly one patient in every one hundred who walked through the doors of Pacific's two clinics registered a formal complaint. During the thirty seven month span from January 1982 through February 1985, some 266 Patient Care Concern Forms were filed. The grievances were in fifty two separate areas. These then took on four distinctive forms; errors in prescribing, dispensing, contact lens, and "other".

The ten most frequently committed errors with their respective number of mistakes is as follows:

Over plussed far sphere power.....	27
Seg ordered too low.....	20
Transcribing error.....	19
Over plussed near add power.....	18
Seg ordered too high.....	15
Wrong type add ordered.....	15
Cylinder axis error.....	14
Under plussed far sphere power.....	14
Cylinder power error.....	11
Lab mistake not caught at verification.....	11

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1. Richardson, William O., Model For A Patient Complaint System For PUCO Clinics, 1981
2. Werner, D. L., Monitoring The Quality Of Care In An Optometric Clinic, Journal of Optometric Education pg. 19-22, Winter/Spring, 1978