

# OPHTHALMIC LENS EVALUATION FORM

## Station 1, Skill 8

Candidate ID # \_\_\_\_\_

Room # \_\_\_\_

### PROGRESSIVE

	SPHERE	CYLINDER	AXIS	DISTANCE OPTICAL CENTERS	ADDITION POWER	FITTING HEIGHT
OD						
OS						

### SINGLE VISION

	SPHERE	VERTICAL PRISM	BASE CURVE	B DIMENSION
OD				
OS				

Revised 6/15/2017

For SP Use Only -- Frame ID: Progressive \_\_\_\_\_ Single Vision \_\_\_\_\_