|  |
| --- |
| **NOTE**: Measurement of tear osmolarity is to be performed at the Baseline visit (00) and at months 06, 12, 18, and 24 at the DREAM Clinical Centers that have the TearLab Osmometer. **All measurements must be done by the DREAM certified technician or clinician.** |

1. Calibration: Following the TearLab instruction guide, calibrate each Pen using the Electronic Check Card.

Record calibration results:

a. Right Pen: \_\_ \_\_ \_\_ mOsms/L **(opcalrt)**

b. Left Pen: \_\_ \_\_ \_\_ mOsms/L **(opcalle)**

1. Tear Osmolarity Measurement: Following the TearLab Quick Reference Guide, test the right eye and the left eye of the study subject.

Record the test results:

a. Right Eye: \_\_ \_\_ \_\_ mOsms/L **(oposmrt)**

b. Left Eye: \_\_ \_\_ \_\_ mOsms/L **(oposmle)**

1. Last name & certification number of person performing

testing:

a. Print Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(qclname)**

b. Certification #: \_\_\_ \_\_\_ \_\_\_ \_\_\_ **(qcconcert)**

1. Date of Exam

 \_\_\_ \_\_\_ / \_\_\_ \_\_\_ / 201 \_\_\_ **(qccompdtc)**

 Month Day Year