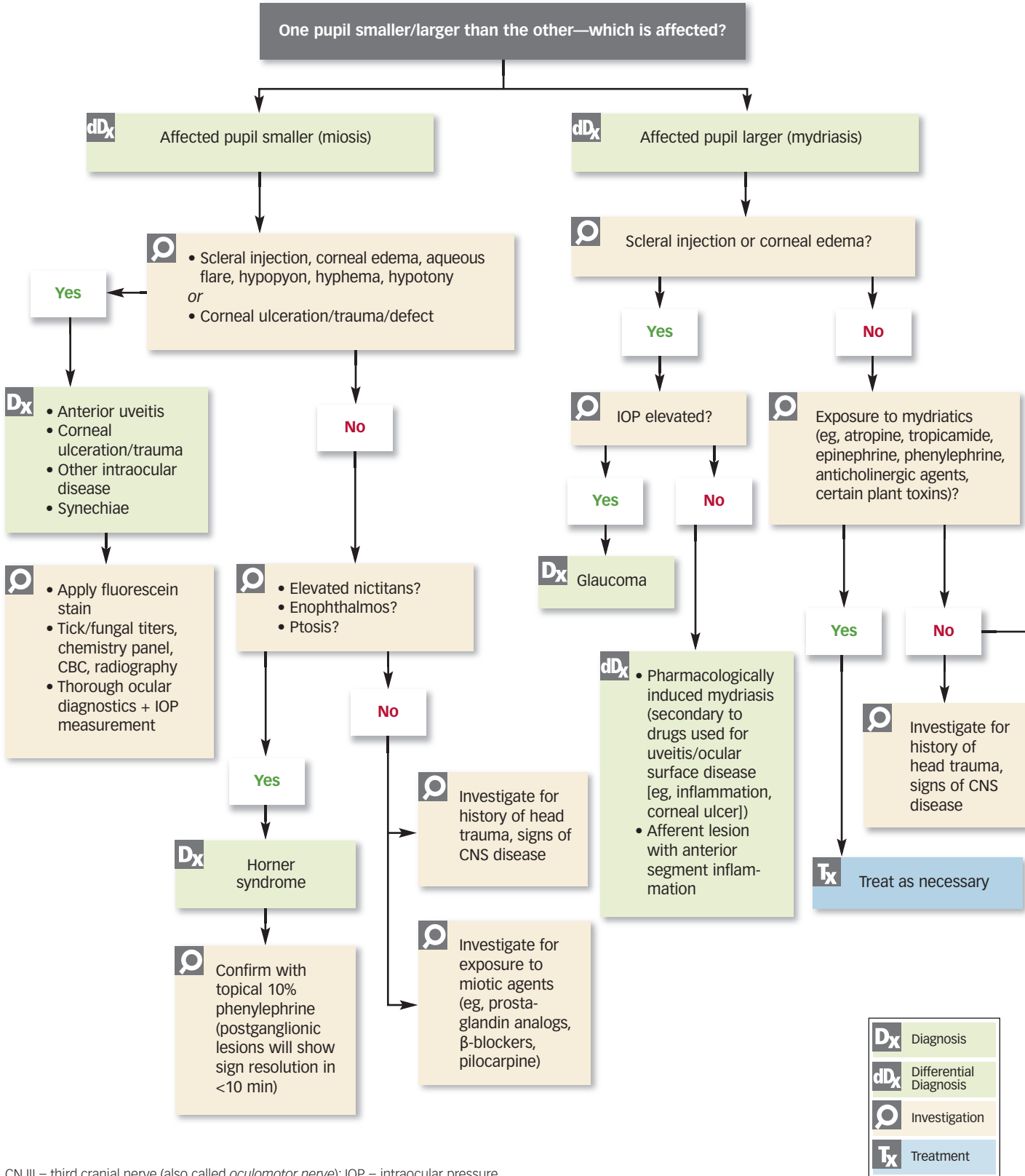


Anisocoria

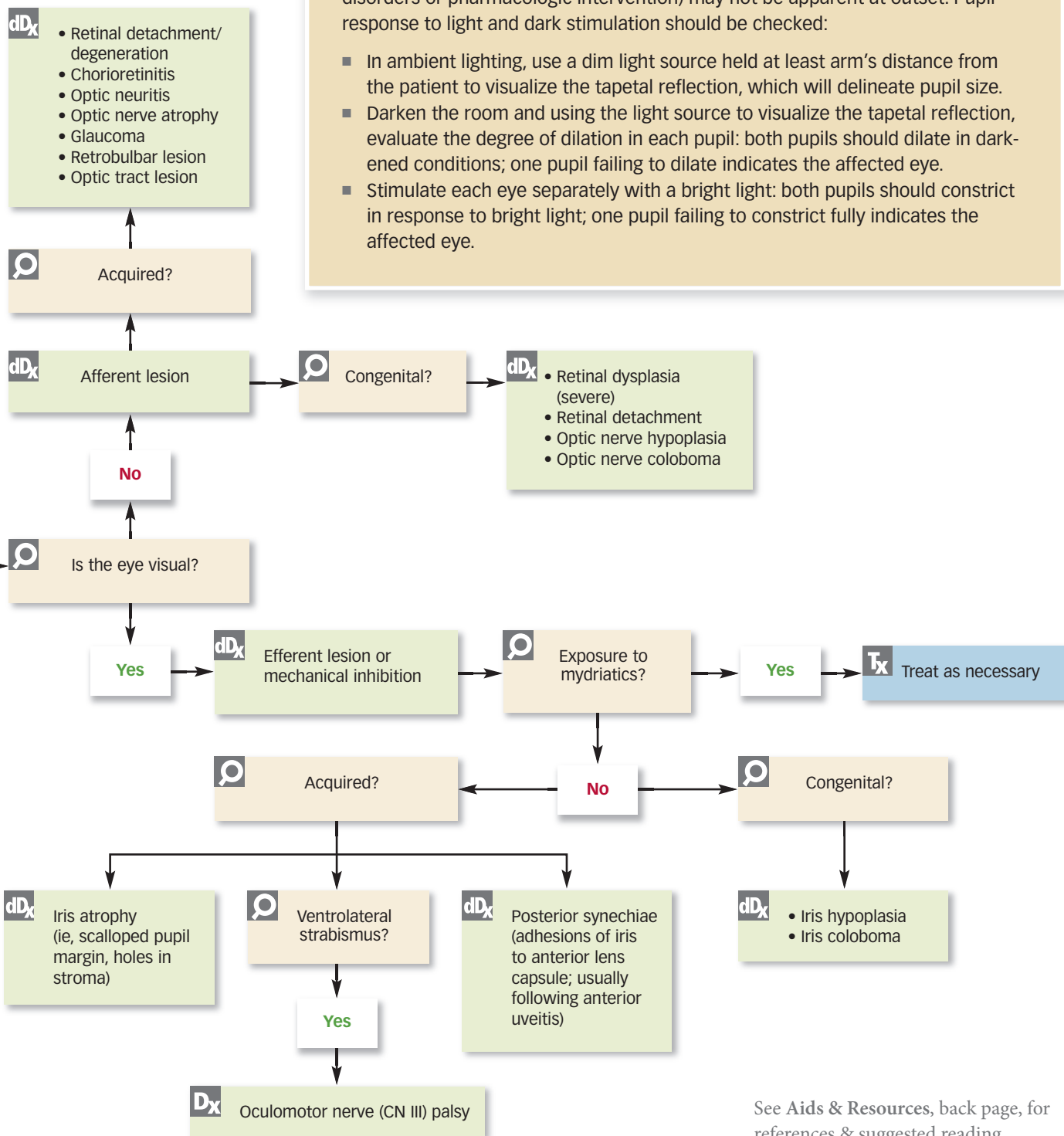


CN III = third cranial nerve (also called *oculomotor nerve*); IOP = intraocular pressure

Pupillary Testing: Determining Which Pupil Is Affected

Anisocoria (ie, asymmetric pupils at rest, potentially caused by ocular/neurologic disorders or pharmacologic intervention) may not be apparent at outset. Pupil response to light and dark stimulation should be checked:

- In ambient lighting, use a dim light source held at least arm's distance from the patient to visualize the tapetal reflection, which will delineate pupil size.
- Darken the room and using the light source to visualize the tapetal reflection, evaluate the degree of dilation in each pupil: both pupils should dilate in darkened conditions; one pupil failing to dilate indicates the affected eye.
- Stimulate each eye separately with a bright light: both pupils should constrict in response to bright light; one pupil failing to constrict fully indicates the affected eye.



See Aids & Resources, back page, for references & suggested reading.