

SELF ASSESSMENT GUIDE

Qualification:	OPHTHALMIC LENS SERVICES NC II	
Project:	PREPARE UV COATED/TINTED OPHTHALMIC LENS	
Units of Competency Covered:	<ul style="list-style-type: none"> • ANALYZE AND INTERPRET OPHTHALMIC LENS PRESCRIPTION • EDGE AND MOUNT OPHTHALMIC APPLIANCES • APPLY UV COAT/TINT TO OPHTHALMIC LENSES 	
Instruction: a. Read each of the questions in the left-hand column of the chart. b. Place a check in the appropriate box opposite each question to indicate your answer.		
Can I?	YES	NO
• Analyze and interpret ophthalmic lens prescription details		
• Operate equipment		
• Perform skills in edging and mounting		
• Utilize computer technology		
• Perform frame modifications		
• Check quality of lens		
• Apply work room practices		
• Identify type of UV coat/tint		
• Apply and check UV coat/tint		
• Dispatch lens		
• Perform basic mathematical operations		
• Observe OHS, standard operating procedures and relevant industry standard		
• Apply frame measurement systems including boxing and datum		
• Identify scope of metal and plastic frame materials including heating, manipulation, adjusting, handling and repair		
• Identify manual/automated edging machine including machine design, blocking/chucking systems, edging wheel characteristics and machine operation		

• Perform glazing techniques		
• Identify impact resistant safety lenses		
• Apply UV coat and tinted lens processes		
• Identify standard nylon rims including the equipment		
• Drills rimless frames including mounts and rimless types and equipment		
• Calculate minimum size uncut (MSU)		
• Transpose a prescription		
• Perform special hand edging techniques		
• Perform problem solving techniques reducing unwanted vertical and /or horizontal prism		
• Rectify off-axis lenses		
• Identify lens types and lens materials		
• Identify process flows and production methodologies.		
I agree to undertake assessment in the knowledge that information gathered will only be used for professional development purposes and can only be accessed by concerned assessment personnel and my manager/supervisor.		
Candidate's Signature:	Date:	
Assessor's Signature:	Date:	