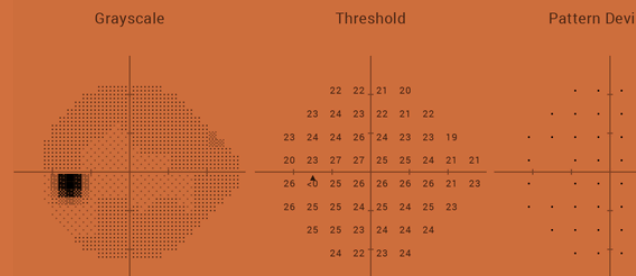


## 60-4 Visual Field Exam Your Comprehensive Guide



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**Patients usually don't notice their peripheral vision until it's lost or reduced.** At that point, they may realize they struggle with spatial orientation or miss hazards that fall outside their line of vision. They may have normal central visual acuity, but significant loss at the periphery. The 60-4 visual field exam measures these changes, especially when they're related to neurological conditions.

This specialty threshold test isn't usually part of routine exams, and not all perimeters can conduct the 60-4. Currently, it's not available with Carrot, but it's still an important test to understand, so you can support your patients with neuro findings and accurately identify less common conditions.

### 60-4 Visual Field Exam Overview

If you have a Humphrey Field Analyzer, you can conduct the 60-4 visual field exam using a suprathreshold or threshold protocol. Unlike the more standard 24-2 or 30-2 exams, which target the central macula and surrounding areas, the 60-4 test presents stimuli at points extending much farther into the peripheral retina. This ability allows you to cover broader zones and provide insight into neurological conditions that other exams cannot.

This test measures visual sensitivity up to 60° in all directions. Unlike most threshold exams, which focus on the central 30°, this grid captures functional deficits in the outermost regions of the visual field.

This test is used selectively, usually only when peripheral pathology is suspected, such as neurological conditions, retinal degenerations, and cases where central vision remains normal but the patient complains of spatial or mobility issues.

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## Academic references and clinical validation



Extended peripheral visual field testing is surprisingly controversial. [An older article in Healyo](#) asserts that the 60-4 is rarely necessary, while more recent conversation explores its clinical and algorithmic applications.



[Recent research](#) has shown that AI can accurately predict 60-4 visual field defects in healthy subjects based on 3D facial reconstruction. This pilot study suggests that there is room for AI tools to improve the interpretation of peripheral field results by accounting for individual facial features.



The 60-4 is not without its limitations. [A study found](#) that healthy males had more peripheral 60-4 visual field defects than females, likely due to differences in facial structure. This insight further suggests that non-clinical factors can impact this far-peripheral measurement.

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## The 60-4 Visual Field Exam at a Glance

This exam measures extreme peripheral sensitivity beyond the 30° radius. The 60-4 is almost exclusively conducted on the Humphrey Field Analyzer in either full or suprathreshold mode. It’s best used for patients with suspected peripheral field loss from neurological, hereditary, or vascular diseases. Conducting the 60-4 test similarly to other perimetry exams, you or your technician will ask the patient to focus on a central point and respond to stimuli in the far periphery. For practices that conduct frequent visual field exams, this shouldn’t be an unusual process. However, there could be false positives due to factors such as facial structure, patient understanding, people with narrow pupils, and others. It’s also a relatively rare test making interpretation a possible challenge.

### Pros and Cons of the 60-4 Visual Field Exam

We know the 60-4 visual field exam is efficient, useful, and widely used, but there are pros and cons to incorporating this test into your routine.

PROS	CONS
Use this exam to assess areas outside the reach of most visual field tests.	The 60-4 is a specialized test and does not provide the same level of data as central visual field tests.
The 60-4 is particularly valuable in advanced glaucoma or neurological conditions that affect the visual pathways.	The 60-4 is prone to fixation losses, unreliable responses, and false positives.
You can diagnose and monitor visual complaints by documenting any loss of peripheral vision.	It is not ideal for early glaucoma diagnosis.

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## List of Ocular Diseases Monitored and Diagnoses Identified by the 60-4 Visual Field Test

<p><b>Advanced Glaucoma</b></p>	<p>While early glaucoma affects central and paracentral fields, advanced cases often result in significant peripheral vision loss. The 60-4 can map out the extent of the remaining field.</p>
<p><b>Chiasmal or Retrochiasmal Lesions</b></p>	<p>Patients with tumors, pituitary adenomas, or damage to the visual pathway may <a href="#"><u>present with visual field loss</u></a>. The peripheral testing pattern of 60-4 can help characterize these defects more clearly than central tests.</p>
<p><b>Retinitis Pigmentosa</b></p>	<p><a href="#"><u>Retinitis pigmentosa</u></a> gradually narrows the visual field, starting in the peripheral area. A 60-4 field exam can document these changes early and track disease progression.</p>
<p><b>Stroke and Traumatic Brain Injury</b></p>	<p>Depending on the location of the lesion, patients may lose significant peripheral awareness. The 60-4 can help assess the extent and laterality of loss, which may not be evident on basic confrontation testing.</p>
<p><b>Drug Toxicity</b></p>	<p><a href="#"><u>Drug-induced visual field defects</u></a> can have different patterns, and the 60-4 can identify subtle peripheral changes. This test can detect early changes caused by medications such as <a href="#"><u>hydroxychloroquine</u></a> or certain anti-epileptic drugs.</p>

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## Billing and Coding for 60-4 Visual Field Testing

[CPT code 92083](#) is usually used for extended examinations, which can include the 60-4. The [CMS physician fee schedule](#) reimbursement can be anywhere from \$25 to \$80 per exam, but this amount will depend on your practice's location, setting, and the precise type of exam you're providing.

### When is the 60-4 visual field test required?

The 60-4 is reserved for particular cases. Patients with advanced glaucoma, retinitis pigmentosa, tumors, and certain neurological conditions should have this exam about once a year. If this test is already part of your workflow, consider it for patients who complain of changes in their peripheral vision or trouble noticing hazards at the edge of their vision.

### Is the 60-4 required for driver's licenses?

Generally, no. However, in the state of Virginia, to determine visual field loss, the DMV requires the results of a visual field test that measures the central 24 to 30 degrees of the visual field, and testing needs to be completed to 120 degrees (60 degrees from the point of fixation), therefore a 60-4 or equivalent test is acceptable.

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