One of the most common patient complaints in a general ophthalmic practice is pain in or around the eye. The starting point in the evaluation of this symptom is a thorough history. The patient must be given time while the examiner attentively listens to the narrative. A careful physical examination is then performed with detailed attention to ocular and periocular structures as directed by the history. The examination starts with an overview of the whole patient. Non-ocular clues, such as acne rosacea or vitiligo (patches of depigmented skin), can aid the diagnosis. The slit lamp is an indispensable tool to evaluate the anterior segment for a multitude of conditions causing pain from the superficial punctuate keratopathy of keratoconjunctivitis sicca to a chronic smoldering iritis. The ophthalmoscope (direct and indirect) is equally useful in the inspection of the posterior segment from the optic nerve head to the pars plana. The addition of echography to the clinician's armamentarium greatly expands the ability to determine the source of the patient’s pain.

The largest category of eye pain includes the “itis” which includes inflammatory conditions such as iritis, scleritis, and myositis. Other causes include trauma, orbital bone involvement by neoplasms or sinus disease, and increased intraocular pressure.