Your student, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_passed a vision screening on\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date).

IMPORTANT INFORMATION ABOUT CHILDREN’S VISION

**What is the difference between a vision screening and a comprehensive eye examination?**

A vision screening is not a substitute for a comprehensive eye exam. A vision screening can be performed by a school nurse or vision care technician and includes all or some of the following tests:

• Visual acuity measurement

• Depth perception

• Eye muscle balance

The goal of school vision screening programs is to identify children with vision problems who are or may be at risk for vision problems, that if not treated early, can lead to permanent vision loss. Screenings are not diagnostic, but a screening can determine who may need a comprehensive eye examination.

Comprehensive eye examinations can be performed only by an eye doctor (ophthalmologist or anoptometrist). Comprehensive eye examinations include:

• Medical and family history

 • Visual acuity measurement

• Depth perception

• Eye muscle balance

• Pupil function and assessment of peripheral vision

• Structural eye health evaluation including pupil dilation with drops

• Refraction to determine the need for glasses

**Which at-risk groups are encouraged to have a comprehensive eye examination by an**

 **ophthalmologist or optometrist? At-risk groups include those:**

* Who failed a vision screening or who cannot be screened in school;
* Whose parents/guardians, caregivers, or school staff are concerned that their child or student has a vision related problem or is not reaching age appropriate developmental or academic milestones;
* With known neurodevelopmental disorders (motor abnormalities such as cerebral palsy, cognitive impairment, autism spectrum disorder, hearing impairment, or speech delay);
* With systemic or genetic diseases known to have associated eye disorders (e.g. diabetes, juvenile idiopathic arthritis);
* Using medications known to have ocular side effects;
* With a history of premature birth of less than 32 weeks or low birth weight of less than 3.3 pounds (1500 grams) who has not already had a normal comprehensive eye examination; or
* With a known family history of strabismus, amblyopia, or high refractive error in a parent, sibling or child.

**What are the warning signs, symptoms, risk factors, and behavioral problems associated with vision disorders**

 **or eye conditions?**

 A primary care physician, optometrist, or ophthalmologist should evaluate students who exhibit the

 following signs, symptoms, or behaviors:

• Squinting or frowning when trying to focus • Headache, nausea, or dizziness

• Tilting or turning of head to one side most of • Strabismus

 the time • Excessive blinking

• Complaints of blurred or double vision • Unusual sensitivity to light

• Watery, red eyes or complaints of burning, • Eyelid lesion or infection

 scratching or itchy eyes • Cloudiness or haze of cornea

•Closing or covering one eye when doing • White pupil

 near work • Unequal or irregular pupils

• Needing to hold reading material close to • Signs of eye injury

 their face or move closer to board

**What are the potential educational impacts of untreated visual impairment?**

 Visual functioning is a strong predictor of academic performance in school-age children.’ Untreated vision

 problems may interfere with learning and can lead to permanent vision loss. Early detection and treatment of

 vision problems are critical for optimal eye health and academic success. Students with undiagnosed vision

 disorders or eye conditions may exhibit problems with attentiveness, behavior in the classroom, or behavior at

 play.

**What are the most common vision problems in children?**

 The vast majority of vision problems in students are treatable. The most common vision problems in children

 are:

• Refractive errors (the need for glasses)

• Strabismus (eye misalignment)

• Amblyopia (lazy eye)

There are less common and more difficult to treat medical eye conditions which include, but are not limited to:

• Nystagmus

• Cataracts

• Glaucoma

• Optic Atrophy

• Cortical visual impairment

• Optic nerve hypoplasia

• Retinopathy of prematurity

1Prevent Blindness: <https://www.preventblindnessorg/childrens-vision-and-eye-health>

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