


Vision Screening Tips:

Screening from Birth to 5 Years

and


Closing the Gap Between Referrals and Eye Care

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October 17, 2023




National Center
for Children's Vision
and Eye Health
Prevent Blindness

1



- Education and Outreach Coordinator for Prevent Blindness
- *Work with the National Center for Children's Vision and Eye Health (NCCVEH) at Prevent Blindness, provide Technical Assistance, and oversee the national online Prevent Blindness Children's Vision Screening Certification Course.*
- Worked in vision screening 22 years.
- *Co-authored published papers regarding vision screening.*
- Presented nearly 250 national webinars and evidence-based vision screening lectures at international, national, regional, state, and local venues.
- *Contracted consultant for School Health and Good-Lite.*
- Consultant to the Vision Screening Committee of the American Association for Pediatric Ophthalmology and Strabismus (AAPOS)



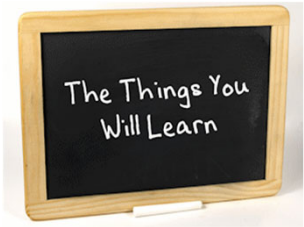
2


3 Learning Objectives

List 2 evidence-based approaches to screening infants and toddlers.


List 2 questions to ask families when digging deeper into the “why” an eye exam is not happening.

List 2 evidence-based approaches to screening the vision of children ages 3, 4, and 5 years.





3



For good vision . . .


- Straight eyes

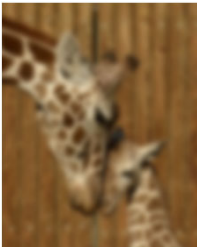
For good vision . . .

- Eyes and vision system work correctly

For good vision . . .

- Focused and clear image from each eye





4

How is Clear Vision Helpful for Children?

- Healthy development
- Ability to learn
- Child’s self-esteem and confidence
- Improved classroom behavior
- Athletic ability

By screening vision, and helping families get an eye examination after a post-screening referral - **YOU** play an important role in helping to make sure children have clear vision!



5

Four Steps to Simple Solution





6

- Observation
- Birth to 1st Birthday
- Ages 1 and 2 Years
- Ages 3, 4, and 5 Years

<https://nationalcenter.preventblindness.org/vision-screening-guidelines-by-age/>

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7

Vision Screening . . . Begins with Observation

Signs of Possible Vision Problems in Children

If your child shows one or more of these signs, have your child seen by an eye doctor without delay.

| Appearance | Behavior | Complaints |
|--|--|--|
| <ul style="list-style-type: none">❑ Eyes do not line up or look straight ahead – one appears to look inward toward nose, outward toward ear, upward toward forehead, or downward toward cheek❑ Eyelids are red-rimmed, crusted, or swollen❑ Eyes are watery or red (inflamed)❑ Eyelid does not fully open (droopy)❑ Recurring stye or bump (infection) on eyelid❑ Color photos of child's eyes show a white reflection in the pupil (middle of the eye)❑ The pupil (the black circle in the colored part of the eye) in one eye is larger than the pupil in the other eye.❑ The iris (colored part of the eye) in one eye is not the same round shape and size as the iris in the other eye❑ Both eyes jerk back and forth quickly from side to side | <ul style="list-style-type: none">❑ Rubs eyes often❑ Closes or covers one eye when reading or looking at a close object❑ Squints eyes when trying to see things near or far away❑ Tilt head or turns face when playing with a toy, trying to read, or trying to see something near or far away❑ Has difficulty concentrating when reading, doing schoolwork, or doing other close-up work❑ Brings toys or books close to his or her face❑ Blinks eyes more than usual or is cranky when doing close-up work❑ Seems unusually clumsy - Bumps into things often or knocks things over❑ Avoids doing near work or reading | <ul style="list-style-type: none">❑ Eyes itch, burn, or feel scratchy❑ Blurred vision when looking at near objects, such as toys or books❑ Dizziness, headaches, or nausea when doing near work❑ Light is too bright❑ Unable to see something other people can see❑ Sees worse at the end of the day❑ Difficulty copying material from a whiteboard in the classroom |

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<https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/10/2A-Signs-vision-problems-in-children.pdf>

8

Key Year 1 Vision Development Milestones

18 Vision Development Milestones From Birth to Baby's First Birthday

P. Kay Nottingham Chaplin, EdD – Kira Baldonado, BA

About this Tool

- This document is a vision screening tool for Early Head Start. Parents as Teachers, and other early care and education programs.
- This tool includes vision milestones in order of typical development.
- The 1st column lists the age.
- The 2nd column lists the milestones typically expected to occur for the age.
- The 3rd column lists the questions to ask.
- The 4th column lists Next Steps when a referral is required. It also provides activities that parents and caregivers can do to help with the milestones.
- Because each child develops differently and may meet the vision milestones at different ages, vision milestones may vary up to 6 weeks; some questions provide ages for rescreening before referring.
 - Although milestones may vary up to 6 weeks, if baby's eyes appear to be constantly misaligned (possible strabismus) at age 2 months or older, refer immediately for an eye examination.
- When using this tool with children who were born prematurely and have no health challenges, adjust chronological age to the corrected age* and use this tool based on corrected age (see above box). Visual development milestones may be delayed if babies have health challenges (e.g., genetic syndromes, neurologic and metabolic conditions, etc.). For these children, use vision screening results from the baby's primary care provider or eye examination results from the baby's eye care professionals to meet your vision screening mandate.

Instructions:

- Visual skills typically develop in a particular order. To determine if the baby has met all vision milestones, begin with the first milestone on Page 2 regardless of baby's age for the first screening. Do not skip to the chronological or corrected age of the baby you are screening. If you use this tool multiple times with a child and the child did not require a referral, begin the next screening with the milestone matching the child's chronological or corrected age.
- Check the appropriate boxes in the "Questions" column. Some will require rescreening if the vision milestone has not been met.
- Complete the "Questions" column of the table before completing the Pass/Rescreen/Refer Documentation pages beginning on page 10. This tool **and/or** the Pass/Rescreen/Refer Documentation can be scanned into electronic medical records and included in the baby's hard file for record-keeping purposes.
- Use this tool monthly throughout baby's first year to monitor vision development milestones.

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***To calculate "corrected age", subtract the number of weeks born before 40 weeks of gestation from the chronological age. For example, chronological age = 6 months (24 weeks). Child born at 28 weeks gestation. 40 weeks minus 28 weeks = 12 weeks. Chronological age of 24 weeks minus 12 weeks equal 12 weeks (3 months). Corrected age is 3 months. You may find this age calculator helpful: https://www.monthbytwos.com/premature_baby_age_calculator.jsp**

<https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/05/18-Key-vision-questions-to-ask-in-year-1-version-5.27.2020.pdf>

Child's Name: _____ DOB: _____ Age: _____

| AGE (Milestones may vary up to 6 weeks.) | MILESTONE | QUESTIONS | NEXT STEPS |
|---|--|--|--|
| During 2 nd and 3 rd months | 3. Baby begins to notice his/her hands. | 3. Is baby aware of his/her hands during the 2 nd month? <input type="checkbox"/> Yes (pass). <input type="checkbox"/> No (refer and move to Next Steps). | <input type="checkbox"/> Refer to baby's pediatric primary health care provider for further evaluation and to coordinate a referral for an eye examination. <input type="checkbox"/> Refer to Birth to 3 Early Intervention program. <input type="checkbox"/> Activities parents and caregivers can do: <ul style="list-style-type: none">Look at your baby with his/her face about 8 to 15 inches from your face, wait for your baby to look at your face, and smile, sing, or talk to your baby. Play together and have fun!Hold a favorite toy, bottle, or patterned and high-contrast object within 8 to 15 inches (20.32 – 38.1 cm) of your baby's face. Slowly move the object up and down or side to side. Play together and have fun! |
| | 4. Baby makes eye contact with parent or caregiver. | Does baby look directly at parent's or caregiver's eyes? <input type="checkbox"/> Yes (pass). <input type="checkbox"/> Not Yet (rescreen within 6 weeks). Date for rescreen: _____ <input type="checkbox"/> If "No" after rescreening, move to Next Steps. | |
| | 5. Baby follows moving lights, faces, people, and objects with both eyes together. | 5. Is baby following moving lights, faces, people, and objects with both eyes together? <input type="checkbox"/> Yes (pass). <input type="checkbox"/> Not Yet (rescreen within 6 weeks). Date for rescreen: _____ <input type="checkbox"/> If "No" after rescreening, move to Next Steps. | |
| | 6. Baby has a social smile. | 6. Is baby smiling at his/her parent or caregiver by age 3 months? <input type="checkbox"/> Yes (pass). <input type="checkbox"/> No (Refer and move to Next Steps). | |
| | IF BABY IS AGE 3 TO 4 MONTHS, ALSO DO THE FOLLOWING MILESTONE | | |
| | | | |

Screener's Signature: _____ Date: _____

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Page 3

Ages 1 and 2 Years

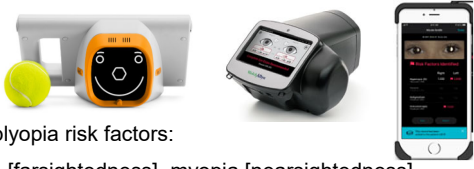
Instrument-Based Screening

- Analyzes STRUCTURE of the eyes
- Provides estimated information about amblyopia risk factors:
 - Significant refractive error (hyperopia [farsightedness], myopia [nearsightedness], astigmatism [blurred vision at both near and far])
 - Anisometropia (significant difference of refractive error between the two eyes)
 - Eye misalignment
- DOES NOT measure visual acuity (e.g., 20/20) – how brain interprets CLEARNESS of vision at specified distance
- Measurements CANNOT be converted to visual acuity value


Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/ops-92-06.pdf>

Cotter, S. A., Donahue, S. P., & Moore, B. (2021). Position statement on the relationship between visual acuity and refractive error in the context of preschool vision screening using instrument-based technology. *Optometry and Vision Science*, 98(1), 102. https://journals.haw.com/optvissci/Fulltext/2021/0100/Position_Statement_on_the_Relationship_between_15.aspx

Donahue, S. P., Baker, C. N., & AAP Committee on Practice and Ambulatory Medicine, AAP Section on Ophthalmology, American Association of Certified Orthoptists, American Association for Pediatric Ophthalmology and Strabismus, American Academy of Ophthalmology (2016). Procedures for the evaluation of the visual system by pediatricians. *Pediatrics*, 137(1), e20153597. <https://publications.aap.org/pediatrics/article/137/1/e20153597/52806/Procedures-for-the-Evaluation-of-the-Visual-System?searchresult=1>



11



Ages 3, 4, and 5 Years



2 Approaches to Vision Screening

1. Optotype-based screening

- Tests of visual acuity using optotypes to measure visual acuity as interpreted by the brain
 - Quantifiable measurement of the sharpness or clearness of vision when identifying specific optotype sizes at a standardized distance

2. Instrument-based screening

- Instruments do not measure visual acuity
- Instruments use an automated image acquisition and analysis system of the eyes to provide information about amblyopia risk factors:
 - Estimates of significant refractive error (hyperopia, myopia, astigmatism)
 - Estimates of anisometropia
 - Estimates of eye misalignment (some, not all)



Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/ops-92-06.pdf>

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12

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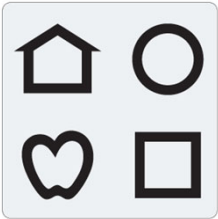
6

Optotypes Beginning Age 3 Years

- NCCVEH
- AAP
- Recommend LEA SYMBOLS[®] and HOTV letters as optotypes

Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/oxp-92-06.pdf>

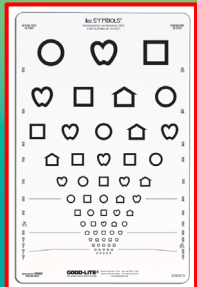

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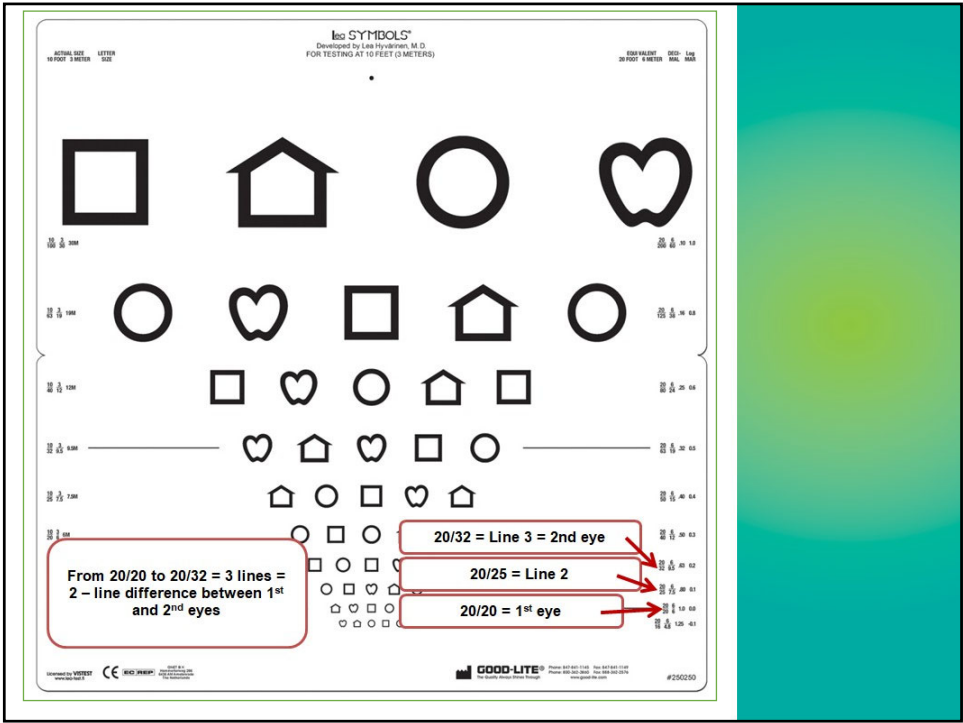
13

Threshold & Critical Line Screening

- Threshold screening
 - Move down chart until child cannot correctly identify majority of optotypes
- Critical line screening
 - Use only line child needs to pass according to child's age



14



15

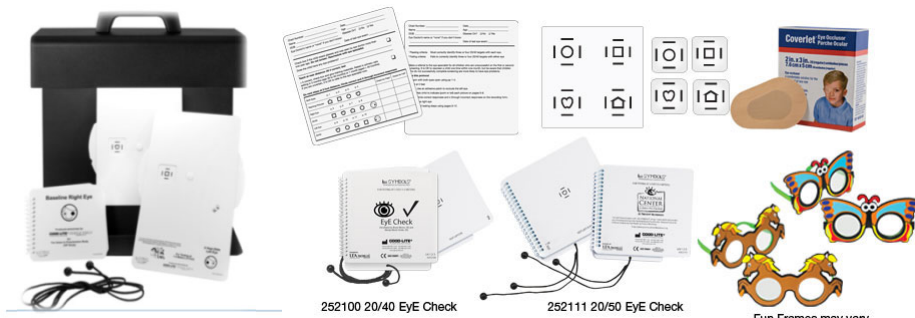
Threshold & Critical Line Screening

- Threshold screening
 - Move down chart until child cannot correctly identify majority of optotypes
- Critical line screening
 - Use only line size child needs to pass according to child's age

16

Preferred Optotype Format


NCCVEH national guidelines call for using single, LEA SYMBOLS® or HOTV letter optotypes surrounded with crowding bars for children ages 3, 4, and 5 years at 5 feet




Fun Frames may vary

Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/opx-92-06.pdf>

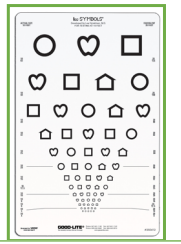
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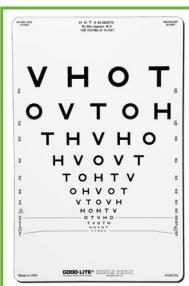
Other Options



New Sight Line Kit




LEA SYMBOLS®




HOTV

18



To Point or Not to Point . . . ?

- Pointing to each optotype to help children know where they are on the chart is permissible.
☐ True or False?
✓ False
- 1.8 “Line-by-line isolation or pointing may be used, **but not letter by letter.**”

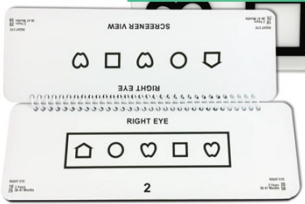
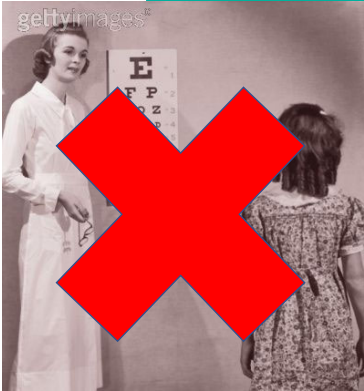


World Health Organization (2003). Consultation on development of standards for characterization of vision loss and visual functioning. Geneva: Switzerland.
http://apps.who.int/iris/bitstream/10665/68601/1/WHO_PBL_03.91.pdf


19

No Pointing at Optotypes

- Holding pointer at optotype makes optotype easier to identify.
- *Instead . . . briefly point under or over top of optotype and quickly remove pointer.*
- If line has a box around optotypes, stay outside the box with pointer.







20




Unacceptable

Occluders Ages 3, 4, and 5 years

- Hand
- Tissue
- Paper or plastic cup
- Cover paddle



- Why unacceptable?
- Children can easily peek



Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/opx-92-06.pdf>

21

Occluders – 3 Years to <10 Years






Cotter, S. A., Cyert, L. A., Miller, J. M., & Quinn, G. E. for the National Expert Panel to the National Center for Children's Vision and Eye Health. (2015). Vision screening for children 36 to <72 months: Recommended practices. *Optometry and Vision Science*, 92(1), 6-16. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/opx-92-06.pdf>

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22



Ages 3, 4, and 5 Years


2 Approaches to Vision Screening

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- Tests of visual acuity using optotypes to measure visual acuity as interpreted by the brain
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- Instruments do not measure visual acuity
- *Instruments use an automated image acquisition and analysis system of the eyes to provide information about amblyopia risk factors:*
 - Estimates of significant refractive error (hyperopia, myopia, astigmatism)
 - Estimates of anisometropia
 - Estimates of eye misalignment




23

NCCVEH-“Approved” Instruments

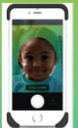
- List maintained at <https://nationalcenter.preventblindness.org/instrument-based-vision-screening/>
- Instruments on this list
 - Have supporting published, peer-reviewed evidence
 - Have undergone review by the National Expert Panel/Advisory Committee of the NCCVH
 - Are appropriate for use in defined ages and setting




Plusoptix S12R, S12C, S16
WITHOUT visual acuity
add-on component



Welch Allyn
Spot Vision Screener



GoCheck Kids without
visual acuity component



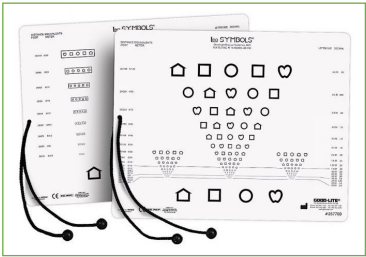
Retinomax
(Right Mfg. Co Ltd.-
Tokyo, Japan)

24

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12

If Required to do Near Vision Screening



LEA SYMBOLS®



25

If Required to do Stereoacuity Screening



PASS 2 Smile Test



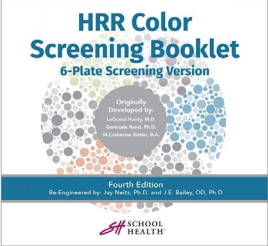
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26

Color Vision Deficiency Screening


Color Deficiency (only conducted once)

- Pseudoisochromatic plates



27

Closing the Gap Between Referrals and Eye Care




Small Steps:
Bridging the Gap Between Vision Screening Referrals and Confirmatory Eye Examinations

Financial Concerns System Barriers Family Challenges Lack of Knowledge Beliefs About Vision

Vision Screening Referral Confirmatory Eye Exam


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28

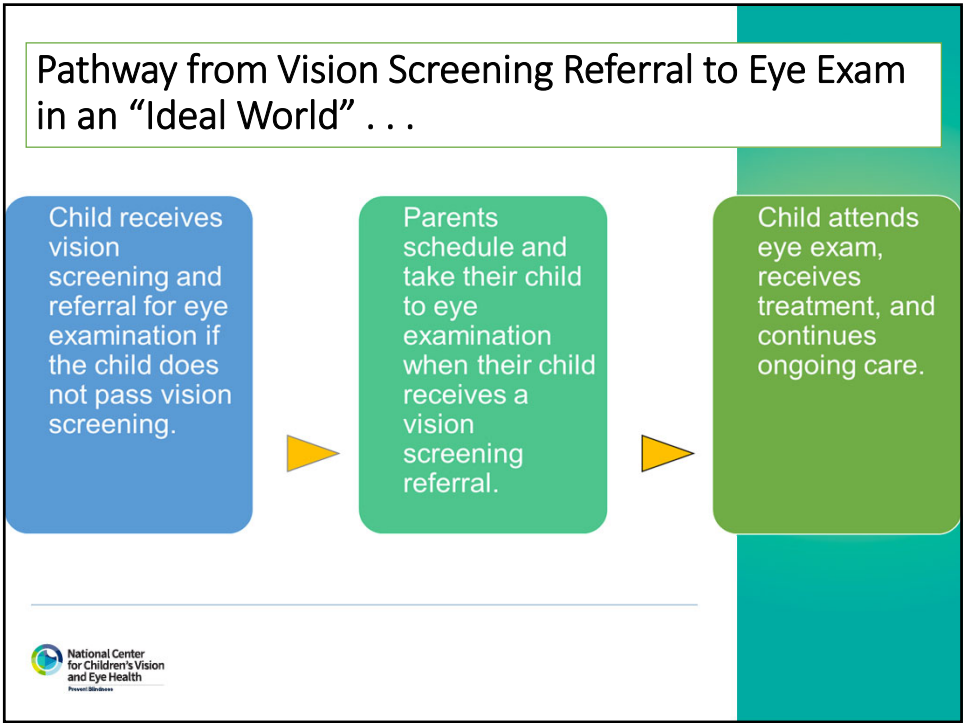


Why Resolve Barriers to Treatment?

- A failed vision screening **without** a follow-up, confirmatory eye examination, treatment and/or monitoring, and ongoing vision care **is not a complete vision screening.**
- **Undetected and untreated vision disorders** may be **difficult to treat**, lead to worsening and **permanent vision loss**, and **impact learning** if not treated early.
- One letter or one phone call may not be enough to ensure eye examination occurs.



29




30

Misconceptions

As vision screeners, we often think parents and caregivers will automatically follow the ideal pathway from receiving vision screening referral, scheduling, and taking their children for an eye examination, receiving treatment, and continuing ongoing vision care.


We may not always consider the level of knowledge parents/caregivers have about vision and eye health, how they feel about their children wearing glasses, or other barriers and cultural beliefs related to the follow-up eye examination and ongoing vision and eye care.

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31

A breakdown in the “Ideal World Pathway” often happens at this step ...

Parents schedule and take their child to eye examination when their child receives a vision screening referral.

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32



Rate of Confirmatory Eye Examinations

Approximately **5% to 50% of children** receive eye exam after vision screening referral

Neitzel, A. J., Wolf, B., Guo, X., Shakarchi, A. F., Madden, N. A., Repka, M. X., Friedman, D. S., & Collins, M. E. (2021). Effect of a randomized interventional school-based vision program on academic performance of students in grades 3 to 7: A cluster randomized clinical trial. *JAMA Ophthalmology*, 10.1001/jamaophthalmol.2021.3544. Advance online publication. <https://doi.org/10.1001/jamaophthalmol.2021.3544>

33




Finding the “Why” the Breakdown Occurs

- Do not call families “noncompliant”.
- Dig deeper to find the “why”.
- Look at common barriers and cultural beliefs.
- Work with families to address barriers and beliefs.

DIG DEEPER



34




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4 Tips to Attempt Overcoming Barriers and Beliefs

- Determine how the family wants the vision screening results.
 - ☐ In Person
 - ☐ Written?
 - ☐ Verbal by phone?
 - ☐ Text message?
 - ☐ Email?
 - ☐ What language?

35




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4 Tips to Attempt Overcoming Barriers and Beliefs

- Eye doctors stated: ". . . other family members, especially the in-laws in a joint family, act as barriers by stating their difference of opinions, creating doubts regarding the child's need for medical care, and sometimes confusing parents, not allowing them to seek care." (p. 1141)
- "Husband not allowing the wife to take the baby to consultation. In-laws don't allow the mothers to bring. Mother is scared basically blame will come on her" . . . (p. 1141)
- **Tip: In multi-generational households – talk with individual in family who makes the medical decisions.**


Balasubramaniam, S. M., Kumar, D. S., Kumaran, S. E., & Ramani, K. K. (2013). Factors affecting eye care-seeking behavior of parents for their children. *Optometry and Vision Science*, 90(10), 1138–42. <https://doi.org/10.1097/OPX.0000000000000010>

36

**4 Tips to Attempt Overcoming Barriers and Beliefs**


1. **Call local eye doctors and document for each eye doctor the following (and share this information with parents/caregivers):**
 - a. Eye Doctor Name
 - b. Practice Name
 - c. Website Address
 - d. Physical Address
 - e. Telephone Number for Appointments
 - f. Hours Open for Business
 - g. Typical Time Eye Examinations Occur After an Examination is Scheduled
 - h. Whether or Not the Eye Doctor Accepts Medicaid
 - i. Other Types of Payment Accepted
 - j. Languages Spoken at the Office
 - k. Population Specialty (e.g., African American children, American Indian and Alaska Native children, Latinx children, etc.)
 - l. Whether or Not Interpreters are Provided
 - m. Whether or Not the Eye Doctor Examines and Treats Young Children
 - n. Whether or Not the Eye Doctor Examines and Treats Children With Special Health Care Needs, Including Infants and Toddlers (If the eye doctor does not see Children with Special Health Care Needs, will the eye doctor give you a name and telephone number of the closest eye doctor who will see Children with Special Health Care Needs?)
 - Assign a volunteer to update the list every 6 months and include the revised date on the document to ensure families receive an up-to-date list.

37

**4 Tips to Attempt Overcoming Barriers and Beliefs**

- Two questions to start the conversation when taking a deeper dive into “why” eye examinations are not scheduled.
 1. “What needs to happen for your child to receive an eye examination, and treatment if necessary . . . and how can I help you?”
 2. “Do you have any concerns with treatments that may be recommended for your child, such as wearing eyeglasses?”

38




Financial Barrier

Prevent Blindness Programs:

- VSP (Vision Service Plan) Eyes of Hope Gift Certificate Program: Provides eye exams and eyeglasses.
- OneSight Eyeglass Referral Program: Assists clients with current eyeglass prescriptions with quality eyewear.
- **Contact Tasha:**
 - 800-331-2020
 - info@preventblindness.org

39



Scheduling Eye Examination Barrier

HOW TO SCHEDULE AN EYE EXAMINATION

Small Steps for BIG VISION

Step 1: Find an Eye Doctor:

An eye doctor examines your child's eyes to find out if your child has a vision problem that requires treatment now (such as eyeglasses or patching) or follow-up visits to see if treatment is needed in the future. An eye doctor can be an ophthalmologist, pediatric ophthalmologist, optometrist, or pediatric optometrist. Depending on the type of eye or vision problem your child may have, the age of your child, other health conditions, who is available to examine your child's eyes and vision, and the type of insurance you have, one type of eye doctor may be better to visit than another.

To find an ophthalmologist:
www.aao.org/eye-health/finding-an-eye-doctor

To find a pediatric ophthalmologist:
www.aao.org/eye-health/finding-an-eye-doctor/pediatric

To find an optometrist:
www.aao.org/eye-health/finding-an-eye-doctor/optometrist

Step 2: Make the Eye Examination Appointment

1. Call your insurance company and ask if your insurance plan will cover the eye examination and the doctor you want to see.
 - a. Ask if your insurance company has rules about making eye appointments on certain days and times.
2. Routine eye exams and glasses are often covered by vision insurance.
3. Medical concerns about your child's eyes are often covered by health insurance.

2. When you call to make an appointment, be ready to explain all eye or vision problems your child is having.

- a. For example, you could say you are calling to make an eye exam appointment because your child did not pass a vision screening.

You may want the eye doctor to look at vision concerns from this link: [Signs of Possible Vision Problems in Children or Parent Educational Checklist](#)

3. If your child has a disability, ask if the eye doctor has experience working with children with disabilities, especially sensory issues, and your child's particular disability.
 - a. If the eye doctor does not have experience, ask if the office you called can recommend another eye doctor to call.
4. Try to get an appointment when your child is not likely to be sleepy or hungry.
5. After you make the appointment, write the doctor's name, date, and time of the examination on a piece of paper and place the paper on your refrigerator or add a reminder in your paper or mobile phone calendar to help you remember the appointment.

Questions you might ask during the eye examination if your child has an eye or vision problem and needs treatment:

- What is my child's eye or vision problem?
- What caused the eye or vision problem?
- Will it get better or worse?
- Will my child need eyeglasses?
- What are the treatment options?
- Can you tell me how much my child can see?
- Will the eye or vision problem limit my child's activities?
- Can any other children have the same eye or vision problem?
- When should return for the next exam?
- When is the best time to call if I have more questions?
- What else do I need to know?
- Ask at a follow-up eye examination appointment: Are there any changes since the last exam? Better or worse vision?

*Adapted from the [Small Steps for Big Vision](#) for the [Eyes of Hope](#) program.

6. If you run into problems making an appointment or are concerned about costs of the eye exam or treatment, talk to your child's primary health care provider, Head Start staff person, or school nurse.

7. If you have a disability and need assistance with making the eye appointment or need someone to go with you to the eye exam, talk to your Head Start program staff or school nurse.

8. If you need a translator at the eye examination visit, ask if the eye doctor has a translator. You may need to bring a translator with you to the visit.

Step 3: Examination day! Prepare for the Visit!

1. Watch a video of a visit to an eye doctor so you know what to expect during the eye examination.
 - a. **What to Expect at the Pediatric Ophthalmologist**
 - a. **Your Child's Eye Exam Dr. Tracey Strombeck - Video from Prevent Blindness Wisconsin**
2. Have a plan ready in case you need to spend a long time in the waiting room. For example, bring a favorite storybook, coloring book and 1 or 2 crayons, a small toy or cuddly stuffed animal your child can play with quietly, and a healthy snack if your child gets hungry.
3. If your child has a disability, bring papers about your child's disability to give to the eye doctor.
 - a. If your child has an Individualized Family Service Plan (IFSP), an Individualized Education Plan (IEP), or a 504 Plan, ask the eye doctor if vision information should be added to these plans.
4. Write the questions you want to ask your child's eye doctor (examples of questions are below).
5. When you are in the exam room, you may want to ask the eye doctor to let your child watch a family member get an eye exam. Or the eye doctor could examine your child's stuffed animal. This will depend on your child's age. Ask the eye doctor to tell your child what is going on during the exam. Encourage your child to ask questions about what the eye doctor is doing.

Vision Care Financial Assistance Medicaid

Center for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244
Phone: (877) 267-2323 | www.Medicaid.gov

The best place to start is the Medicaid office of your particular state. You can also find information and assistance at the Medicaid.gov website and the individual state Medicaid websites (Go to the menu and select "State Overviews").

OneSight's OnSite Voucher Program

Phone: (888) 335-6348 | www.onesight.org

Through OneSight's OnSite Voucher Program, eligible patients can receive glasses free of charge. For information on this program, contact PreventBlindness@onesight.org

Prevent Blindness

"Small Steps for Big Vision" is an initiative of the National Center for Children's Vision and Eye Health at Prevent Blindness (www.preventblindness.org). For more information, contact info@preventblindness.org.

VSP® Eyes of Hope® Gift Certificate Program

Phone: (800) 878-7198 | giftcertificates@vspofhope.com

VSP® Eyes of Hope® gift certificates provide adults and children in need (family income is at or below 200% of the federal poverty level) with access to eye care and new glasses (if needed) at no cost through a VSP network doctor in their community.

Additional Assistance Programs


For additional information, visit YourSight.VisionCare.org or call 1-800-331-2020. For information in English and Spanish, visit PreventBlindness.org/visioncare/financial-assistance-information/.

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$350,000 with 0% federal funds. The contents are those of the author(s) and do not necessarily represent the official views of, nor endorsement by, HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.

40

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20



IMPORTANT TO REMEMBER . . .

- Barriers and cultural beliefs are unique to each family.
- Do not say parents are noncompliant. The “why” is different for each family.
- Co-create solutions to individual family barriers and cultural beliefs.


One size
does **NOT**
fit all.




41

Vision Screening is . . .

- Part of a process...not a single event.
- 1 of 12 components of a strong vision health system of care.






42

Best Practices and Research

Children's Vision and Eye Health

12 Components of a Strong Vision Health System of Care

<http://preventblindness.org/12-components-of-a-strong-vision-health-system-of-care/>



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43

Evaluating Your Vision Health Program

12 Components of a Strong Vision Health System of Care

Annual Vision Health Program Evaluation Checklist

Evaluation Date: _____ Completed By: _____

Instructions: Review each component described below. Select the "Yes", "No", or other response that best describes your vision health program as it currently operates. Please note comments in the area indicated. Once you have responded to the questions in each of the components proceed to the "Vision Health System Action Plan" located on page 8 to identify areas for attention or improvement in your program.

1. Our program ensures that all parents/caregivers receive educational material, which respects cultural and literacy needs, about the importance of:

- a. Good vision for their child now and in the future.
- b. Scheduling and attending an eye exam when their child does not pass vision screening.
- c. Increased risk for vision problems in defined high-risk populations.

| Check Yes or No | Point of evaluation |
|--|--|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | We have vision health information in all native languages of the families that we serve. |


Directions: Review your responses from the program evaluation form and the notes section for each item. In all areas where "no" was the response selected, or your notes indicate a need for improvement, establish the next steps your program will take to improve efforts in that area. Once all responses have been accounted for, establish your top three priorities out of your needed actions, a date to review progress, and a completion date.

Needed actions:

Priority #1: _____

Priority #2: _____


Priority #3: _____



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Our Vision Is Yours.

Visit <https://nationalcenter.preventblindness.org/vision-screening-guidelines.aspx> for information and resources that will help you improve your vision and eye health program.



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<https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/07/Vision-Screening-Program-Checklist.pdf>


44

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22




To Help **YOU** Do
Your Vision
Screening




45


Evidence-Based Vision Screening Tool Examples

EVIDENCE-BASED VISION SCREENING TOOL EXAMPLES
States, and even separate school districts within states, have varying vision screening procedures and protocols. The following information provides recommendations from evidence-based sources, including the National Center for Children's Vision and Eye Health at Prevent Blindness and Bright Futures.



OBSERVATION/CHECKLIST APPROACH December 2021

| TEST | AGES | TOOLS | OPTOTYPES | PASS | NOTES AND TIPS |
|--|-----------------------------------|---|-----------------------------|---------------------|--|
| 18 Key Vision Developmental Milestones | Birth to 1 st Birthday | 18 Vision Development Milestones From Birth to Baby's First Birthday  | Observation/ checklist tool | Follow instructions | Available in English and Spanish. Begin with 1 st milestone regardless of infant's age to determine all milestones were met. Use tool monthly. English https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/05/18-Key-vision-questions-to-ask-in-year-1-version-5-27-2020.pdf Spanish https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/06/Spanish_18-Key-vision-questions-to-ask-in-year-1-version-5-27-2020-1.pdf Poster for Parents/Guardians English https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/05/18-Key-vision-questions-to-ask-in-year-1-version-5-27-2020-1.pdf Spanish https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/07/ESpm-questions-5x11.pdf |




<https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2021/12/Vision-screening-table-evidence-based-tools-12.6.21.pdf>

46

Popular Parent Document

Available in English, Spanish, and Arabic

https://nationalcenter.preventblindness.org/wp-content/uploads/sites/22/2020/05/18visiondevelopmentmilestones_FINAL_4.20.20.pdf

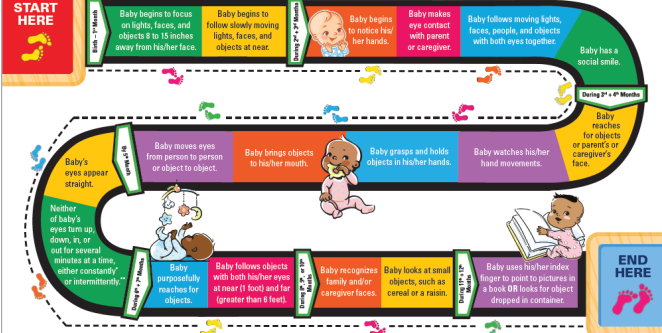


18 Vision Development Milestones From Birth to Baby's First Birthday


Milestones can vary by 6 weeks (except that baby's eyes should appear straight by the 5th month). If your child is not meeting milestones, please talk with your child's primary health care provider.

START HERE

Small Steps for BIG VISION



END HERE




*Consent and content review of this infographic is present at the time and could be up, down, in, or out. **Intermittently and occasionally means an eye turns in, up, or down, only for a short time.

*Small Steps for Big Vision® is an initiative of the National Center for Children's Vision and Eye Health at Prevent Blindness (www.nationalcenter.preventblindness.org). For more information, contact info@preventblindness.org.

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$250,000 with 7% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HHS.gov](https://www.HHS.gov).

47




Vision Screening Certification

- Info for Prevent Blindness nationally recognized vision screening certification you can do online at your own pace
- Prevent Blindness Children's Vision Screening Certification Course (PB CVS)

<https://nationalcenter.preventblindness.org/prevent-blindness-childrens-vision-screening-certification-course/>

Nottingham@preventblindness.org



48



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Resources

Screening Toddlers Ages 1 and 2 Years




- <https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/vision-screening-eye-health-resource.pdf>

Family Vision and Eye Health Education




- <https://nationalcenter.preventblindness.org/small-steps-for-big-vision/>

Vision Screening Guidance by Age



- <https://nationalcenter.preventblindness.org/vision-screening-guidelines-by-age/>

49



Small Steps for BIG VISION

Parent Resources

1. Did you know?

2. 10 take home messages

3. Signs of vision problems in children

4. Association Between Vision and Learning

5. Vision and Classroom Behaviors

6. Difference between vision screening and eye exam

7. Importance of eye exam

8. 10 steps from vision screening to eye exam

9. How to Schedule an Eye Exam

10. Financial Assistance

1. ¿Sabía Usted?

2. Diez mensajes para llevar a casa

3. Signos de problemas oculares en los niños

4. Asociación entre visión y aprendizaje

5. Los comportamientos en el aula pueden estar relacionados con la mala visión

6. Diferencia entre una evaluación de la vista y un examen ocular

7. Importancia del examen ocular de seguimiento después de recibir una referencia de una evaluación de la vista

8. Diez pasos pequeños desde la evaluación de la vista hasta el examen ocular

9. Cómo programar un examen ocular

10. Asistencia financiera


- <https://nationalcenter.preventblindness.org/parents-need-to-know/>

50

“She got an award. . . . because she is one of the highest ranking children in her class in reading. So I said wow. And she said, ‘Yeal mom, I put on the glasses and I am reading!’”

Main Message:
This parent’s story shows what can happen in the classroom when a child received a vision screening, did not pass the vision screening, the parent/guardian received a referral from the vision screening for an eye examination by an eye doctor, the eye doctor examined the child’s vision and eyes, and prescribed treatment.

This process helped a child succeed in reading in the classroom.



Dudovitz, R. N., Izadpanah, N., Chung, P. J., & Slusser, W. (2016). Parent, teacher, and student perspectives on how corrective lenses improve child wellbeing and school function. *Maternal and Child Health Journal*, 20(5), 974–983. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4826825/pdf/nihms743856.pdf>

51

Call to Action

- ❑ Use appropriate vision screening tools from birth through 5 years.
- ❑ If a child is struggling to learn or showing disruptive behaviors during classroom activities – think of vision.
- ❑ Share resources with families about the importance of vision screening and scheduling and attending a follow-up eye examination when their children do not pass vision screening.
- ❑ Assist families with needed support to obtain an eye exam when their children receive vision screening referrals.

52