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| Section 1 - Details of child | |
| Child’s name | **Sunil** |
| D.O.B | **Age 8 years** |
| School | **Forrest Primary** |
| Date of test | **30th May 2020** |

Enter practice/optometrist details here

**Results of your child’s vision assessment**

We hope the following information is useful. We have used the information you gave us about your child and the results we obtained when testing their eyes, to describe their vision.

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| **Section 2 - Additional detail about the eye test** | |
| Who was present at the eye test? | **Mother and classroom assistant present.** |
| What was already known about eyes and vision?  Did anyone have questions about eyes and vision? | **Mum worried about how close Sunil sits to the TV. He isn’t good at seeing things she points out to him in the distance. She thinks his distance vision might be poor. No previous glasses. Longstanding turn in right eye – no surgery. Family history of long-sight and squint.** |
| **Section 3 – Summary: The child’s eyes and vision** | |
| **Sunil worked really hard today and seemed to enjoy having his eyes tested. He has really good vision for far and near without glasses and his eyes are healthy. He has normal colour vision and good focus.**  **Sunil has a turn in his right eye (it looks out to the side). He has had this for a long time and nothing needs to be done about it, but it means he doesn’t have 3D vision and normal depth perception. This makes catching a ball or hitting a ball with a racket more difficult and might be why he often trips over kerbs. The turn in his right eye means he uses his left eye more, but both eyes see well.**  **Sunil’s mum told us that he has problems seeing things pointed out in the distance and finding a toy he is looking for if it is in a pile of other toys. He also gets really close to the TV and she was worried his vision isn’t good. Sunil’s vision is good, but he shows signs of visual processing difficulties that are common in children with autism but should be investigated further. We are going to organise for Sunil to see a teacher who specialises in vision problems (see ‘ACTIONS FROM TODAY’S TEST’ below). Sitting close to the TV won’t harm Sunil’s eyes. Sunil may find it easier to concentrate on the TV when he is close up to the screen. Getting close makes the TV take up more of his vision and in this way other distractions are removed.** | |
| **Actions from today’s test:** | |
| Glasses needed  Modifications to classroom/ schoolwork needed    Statement of Educational Need should include  information about vision needs  Child is eligible for certification as visually impaired  GP Action required  Another specialist needs to see this child  **Our scoping questions on Cerebral Visual Impairment (CVI) suggest Sunil would benefit from further assessment in this area. We have asked a Qualified Teacher for the Visually Impaired/Vision Support teacher to get in touch with Sunil’s school and arrange to see him there.** | |

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| **Section 4 – We tested to see if glasses are needed** |
| This was tested: Yes  No  This was difficult to assess today  We measured for **focusing accuracy**:  This was tested: Yes  No  This was difficult to assess today  **Details: Focussing is accurate.**  We gave a new prescription for glasses: Yes  No  **Details:**  **Sunil does not require glasses at this time.** |

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| **Section 5 – Results of the vision tests we did today** |
| **Visual acuity:** describes how well a person sees black on white detail with glasses if needed. |
| We were able to measure visual acuity for looking at things:  in the distance  close up  both were difficult to test today  ***Distance***  **Crowded letters @3m**  **R 0.1 logMAR (6/7.5) L 0.1 logMAR (6/7.5) – within normal limits for age**  ***Near***  **Crowded letters @ 40cm Binoc. 0.25 logMAR**  **Sunil has good vision both close up and far away.** |
| **Binocular vision and eye movements:** This is how well your child’s eyes work together |
| This was tested today: Yes  No  This was difficult to assess today  **Details:**   **Sunil’s right eye turns out. This is a long-standing eye turn (squint) and does not require action. Because the right eye turns out Sunil uses his left eye to see and he does not have 3D vision.** |

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| **Visual Field:** This is how well your child can see things to the side of their central vision |
| This was tested today: Yes  No  This was difficult to assess today  **Details:**   **Sunil’s peripheral (side) vision appears normal.** |
| **Contrast Sensitivity**: This is how well objects are seen against different backgrounds |
| This was tested today: Yes  No  This was difficult to assess today  **Details:**   **Sunil’s can see low contrast objects easily.** |
| **Evidence of Visual Processing difficulties:** This is when there are visual difficulties caused by problems interpreting visual information in the brain rather than the eyes. |
| This was tested today: Yes  No  This was difficult to assess today  **Details: Our scoping questions to assess for the presence of visual processing problems suggest Sunil would benefit from further assessment in this area. We have asked a Qualified Teacher for the Visually Impaired/Vision Support teacher to get in touch with Sunil’s school and arrange to see him there.** |

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| **Section 6 – Results of the eye health check** |
| This was tested today: Yes  No  This was difficult to assess today  Does the child need to see another specialist about their eye health? Yes  No  **Details:**   **Both Sunil’s eyes appear healthy.** |

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| **Section 7 – Technical details for other health professionals** | | |
| **Visual Acuity** | *Crowded Sonksen LogMAR at 3m* | **R 0.1 logMAR (6/7.5) L 0.1 logMAR (6/7.5) – unaided, good cooperation, within normal limits for age** |
| **Refractive Error** | *Without cycloplegia* | **R +0.75DS L +0.50DS** |
| **Accommodative Function** | *Dynamic ret* | **Accurate unaided** |
| **Ocular Posture and Eye Movement** | *Cover test, ocular motility* | **Mod. R EXOT (longstanding), ocular motility grossly full, no AHP, no nystagmus.** |
| **Contrast** | *Cardiff contrast test* | **66.66 (1.5%) normal for age** |
| **Visual Field** | *Gross confrontation* | **Grossly full** |
| **Eye Health Exam** | *Direct ophthalmoscopy* | **Mod cooperation.**  **External eye and media healthy. Fundi and discs healthy as seen. Discs flat, small central cups (C/D ratio 0.2), healthy NRR, maculae bright reflex seen. Direct, consensual and near reactions brisk, no RAPD, pupils equal and round.** |
| **Colour vision** | *CVTME* | **Normal** |
| **Visual Processing** | *Dutton key questions* | **Score 4/5 – suggests visual processing problems may be present, particularly in relation to crowded material.** |
| **Section 8: Assessors** | | |
| Who is this report from?  Name: Mr A Optom Role: Optometrist  Address:  Who is getting a copy of this report? Parents, Teacher, QTVI/Vision Support services, Educational Psychology, Occupational therapist, Paediatrician, Ophthalmology, Speech and language therapist, GP | | |