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|  Section 1 - Details of child |
| Child’s name | **Declan** |
| D.O.B | **Age 4 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? | **Classroom assistant present, parent unable to attend.** |
| What was already known about eyes and vision?Did anyone have questions about eyes and vision? | **Declan has had glasses from local hospital eye clinic for over a year. Next appt for hospital eye clinic 4 months. Poor compliance with specs. Nystagmus (wobbly eyes) noted soon after birth. Investigated at hospital – no action required. Nystagmus less obvious now than in infancy. Teacher/parents not sure how good vision is. No major concerns re vision.**  |
| **Section 3 – Summary: The child’s eyes and vision** |
| **Declan worked hard today and was able to do most of the tests we tried. He has had glasses for some time now but doesn’t wear them very well. Mum isn’t sure that they make much difference.****Declan needs to wear his glasses all the time to make sure his vision is as good as it can be. Please help Declan wear his glasses by making him feel special and that everyone is pleased with him when he keeps them on. It may take a while before full-time wear is achieved, but keep trying!****Even with his glasses on Declan’s vision at low and high contrast is reduced compared to other children his age. Reduced vision is common in Down syndrome and with nystagmus (wobbly eyes) but needs to be considered in the classroom or he will miss out on important information. Declan sees best when he tips his chin down and looks up at things because his eyes wobble less in this position. He needs round spectacle frames and a tilted desk at school to make the most of this useful habit - please don’t discourage it. Declan is also likely to concentrate better and see better if not too much information is presented on a page.** |
| **Actions from today’s test:** |
| Glasses needed Modifications to classroom/ schoolwork needed  Statement of Educational Need should include information about vision needs**Reading and writing materials need to be larger and bolder I have included examples of the size of letter/pictures/PECs Declan can easily see.** **A soft dark pencil (e.g. 8B) or a black marker pen should help Declan with writing/drawing.** **Black on white information will be more visible than grey or pale colours on white.** **Presenting one thing at a time (isolated presentation) is important****Declan needs to sit close to the smartboard and be allowed to get close to what he needs to see. A tilted desk may help him make best use of his vision for near work.**Child is eligible for certification as visually impaired GP Action required Another specialist needs to see this child  **It would be helpful for a Qualified Teacher for the Visually Impaired (QTVI) or Vision Support teacher to see Declan and help his teachers make modifications to his school work and environment. We will request this to happen. We will do another eye test in six months to look at Declan’s vision and find out how well he is wearing his glasses.** |

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| **Section 4 – We tested to see if glasses are needed** |
| This was tested: Yes [x]  No [ ]  This was difficult to assess today [ ] We measured for **focusing accuracy**:This was tested: Yes [x]  No [ ]  This was difficult to assess today [ ] **Details: Focussing is accurate with glasses on.** We gave a new prescription for glasses: Yes [x]  No [ ]  **Details:**  **Declan is long-sighted with astigmatism. He should wear his glasses all the time to ensure he has the best possible vision when looking both close up and far away. Advise round eye shape as vision best on upgaze.****Declan’s new prescription:****R +4.00/-2.00x180 L +4.50/-2.50x180** |

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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 [x]  close up [x]  both were difficult to test today [ ] **Vision (with old glasses) 6/19 – both eyes open using Cardiff preferential looking cards.****We used a picture test to see how well Declan can see. He would only cooperate with both eyes open as he was uncomfortable having either eye covered. Declan’s vision is lower than we would expect for a child his age.**  |
| **Binocular vision and eye movements:** This is how well your child’s eyes work together |
| This was tested today: Yes [x]  No [ ]  This was difficult to assess today [ ]  **Details:**   **Declan has nystagmus – his eyes wobble slightly when he is looking at things. The wobble has been investigated in the past by the hospital eye service and has got a little less over time. However, Declan’s vision is not as good as expected for his age and the nystagmus is part of the problem. Declan’s eyes wobble a bit less when he tips his chin down and looks up at things.** |

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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 [x]  No [ ]  This was difficult to assess today [ ] **Details: Declan’s peripheral (side) vision appears normal.**  |
| **Contrast Sensitivity**: This is how well objects are seen against different backgrounds |
| This was tested today: Yes [x]  No [ ]  This was difficult to assess today [ ] **Details: Declan’s low contrast vision was below expected for his age. Some suggestions for making his school and play material more visible are provided in Section 3**. |
| **Evidence of Cerebral Visual Impairment (CVI):** This is when there are visual difficulties caused by problems in the brain rather than the eyes. |
| This was tested today: Yes [ ]  No [ ]  This was difficult to assess today [x]  |

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

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| **Section 7 – Technical details for other health professionals** |
| **Visual Acuity** | *Cardiff acuity test at 50cm*  | **With current Rx:****Binoc 6/19 – reduced for age. No co-operation with monoc VA.** |
| **Refractive Error** | *With cycloplegia*  | **R +4.00/-2.00x180 L +4.50/-2.50x180** **Given full plus spectacles for full-time wear. Monitor need for bifocal in future but note effect of upgaze on nystagmus – contraindication for bifocal if persistent.** |
| **Accommodative Function** | *Dynamic ret* | **Accurate with glasses, significant lag unaided** |
| **Ocular Posture and Eye Movement** | *Cover test, ocular motility*  | **Fine manifest-latent nystagmus in primary position – reduced on up gaze. No manifest strabismus. Ocular motility grossly full.** |
| **Contrast**  | *Cardiff contrast test* | **12.5 (8%contrast) – reduced for age** |
| **Visual Field** | *Gross confrontation* | **Grossly full and symmetrical** |
| **Eye Health Exam** | *Binocular indirect through dilated pupils* | **External eye – mild blepharitis right and left. Media clear R&L; fundi healthy R&L; healthy discs; typical spoke vessel arrangement at disc.** |
| **Stereopsis** | *Frisby* | **Equivocal to grossest target– revisit next time.** |
| **CVI** | *Dutton key questions* | **Not completed** |
| **Section 8: Assessors** |
| Whom is this report from? Name: Mr A Optom Role: OptometristAddress: 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 |