



Health – Vision Evaluation

Student's Name _____		Date _____
Vision Acuity at 20 feet:	Vision Acuity at 16 inches:	External Eye Health: ___Normal ___Other
Entering R/20____ L/20____	Entering R/20____ L/20____	Internal Eye Health: ___Normal ___Other
With new correction R/20____ L/20____	With new correction R/20____ L/20____	
Refractive Analysis: _____Myopia (nearsighted) _____Hyperopia (farsighted) _____Astigmatism		
Vision/Binocularity Analysis:	Pass	Borderline
	Fall	Not Tested
Eye alignment of distance	_____	_____
Eye alignment at near	_____	_____
Depth perception	_____	_____
Color vision	_____	_____
Focusing amount	_____	_____
Focusing flexibility	_____	_____
Focusing lag (accuracy)	_____	_____
Convergence (crossing) ability	_____	_____
Saccade (rapid) eye movements	_____	_____
Pursuit (tracking) eye movements	_____	_____
Visual Perceptual Analysis:		
_____ Visual perceptual problems suspected by history _____ Visual perceptual deficits diagnosed during testing		
These findings may contribute to the symptoms noted on the Vision Report Card: _____ Yes _____ No		
Comments: _____ _____ _____		
TREATMENT		
___ No correction necessary ___ No change in present prescription ___ New prescription needed ___ Medical treatment needed for: _____ ___ Vision therapy needed for: _____ ___ Recommend scheduling Visual Perceptual Evaluation ___ Follow-up recommended _____	To be worn for: ___ Constant wear ___ Distance vision only ___ Near vision only ___ May be removed for recess	
Classroom recommendations: _____ _____		
Other: _____		
Dr. _____ Date _____ Phone _____		
I give permission to release this information to my child's school. _____ Date _____ Parent		

Background information for parents regarding
new Vision Evaluation requirements

New State Law Now Requires Vision Evaluations

Beginning with the 2006-2007 school year, students entering school for the first time, including kindergarteners and transfer students from out-of-state, will be required to provide proof of a vision evaluation taken within six months prior to the student's entrance.

The Vision Evaluation is required to test for amblyopia (lazy eye) and strabismus (misalignment of the eyes), which are two of the most common vision disorders in young children, as well as internal and external eye health and visual acuity. A certificate or form stating results of the evaluation must be signed by an optometrist, physician, physician assistant, or advanced practice registered nurse.

According to the Nebraska Foundation for Children's Vision, statistics show that 80% or more of all learning during a child's first 12 years depends on vision, yet one of every five children entering kindergarten has an undetected vision disorder significant enough to impact the child's ability to learn. The foundation notes that symptoms of vision problems often are not evident to parents or educators at early ages and young children often cannot self-identify abnormal conditions.

Typical vision screenings test only for distance vision and are not designed to assess many of the common vision disorders in young children. The new state law will now help assure that more students get a broader assessment of conditions that could adversely impact their learning ability.

Source: Nebraska Foundation for Children's Vision (NEchildrenvision.org)