

Give Your Child the Best Vision Possible

An Educational Checklist Tool for Parents/Guardians



Prevent Blindness

Our Vision Is Vision.

Up to 1 in 17 preschool-aged children, 1 in 5 Head Start children, and an estimated 1 in 4 school-aged children has a vision problem. If not found and corrected early, these vision problems can lead to social and emotional development, classroom behavior, and academic challenges; future employment opportunities; as well as permanent vision loss. Finding vision and eye health problems, treating them early, and continuing follow-up with eye care is the best way to help your child develop their best vision possible.

Do not depend on your child to tell you they are not seeing well. Most children believe the way they see is the way everyone sees. Your child may not know that blurred vision is not normal, or that seeing clearly with only one eye is a problem.

If you think your child has a vision problem, talk with your child's health care provider or an eye doctor right away!

- *If you are not sure your child has an eye or vision problem, answer the questions below. Check "YES" or "NO" to see if your child has an increased chance of having a vision problem.*
- *Check "NA" if the question does not match your child's age (e.g., difficulty copying material from a whiteboard and your child is age 3 years).*

Is your child at a higher risk for eye and vision problems?

- | | |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Was your child born prematurely (less than 32 completed weeks of pregnancy)? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Is there a family history (including parents, grandparents, and siblings) of eye problems (such as wearing glasses before first grade, lazy eye, eye turn or crossed eyes, childhood cataract, or eye tumors)? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Has your child had an eye injury that required a visit to the doctor? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Has your child been diagnosed with a condition that affects his or her physical, mental, and/or social and emotional development (such as cerebral palsy, Down syndrome, ADHD, or an autism spectrum disorder)? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Does your child have any other serious chronic health conditions (such as diabetes)? |

What do your child's eyes look like?



- | | |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | 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 |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Eyelids are red-rimmed, crusted, or swollen |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Eyes are watery or red (inflamed) |



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- Yes No Eyelid does not fully open (droopy)
- Yes No Recurring stye or bump (infection) on eyelid
- Yes No Color photos of your child's eyes show a white reflection in the pupil (middle of the eye)
- Yes No The pupil (the black circle in the colored part of the eye) in one eye is larger than the pupil in the other eye
- Yes No 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
- Yes No Both eyes jerk back and forth quickly from side to side

How does your child act?

- Yes No Rubs eyes often
- Yes No Closes or covers one eye when reading or looking at a close object
- Yes No Your child may still have an eye or vision problem even if your child does not complain or has not shown any of the above signs.
- Yes No Squints eyes when trying to see things near or far away
- Yes No NA Tilts head or turns face when playing with a toy, trying to read, or trying to see something near or far away
- Yes No Has difficulty concentrating when reading, doing schoolwork, or doing other close-up work
- Yes No Brings toys or books close to his or her face
- Yes No Blinks eyes more than usual or is cranky when doing close-up work
- Yes No Seems unusually clumsy - Bumps into things often or knocks things over
- Yes No Avoids doing near work or reading
- Yes No NA Skips/repeats lines when reading (school-aged child)
- Yes No NA Omits small words when reading (school-aged child)
- Yes No NA Has difficulty with reading or other close-up work

Does your child tell you any of these things?

- Yes No Eyes itch, burn, or feel scratchy
- Yes No Blurred vision when looking at near objects, such as toys or books
- Yes No NA Dizziness, headaches, or nausea when doing near work (school-aged child)
- Yes No Light is too bright
- Yes No Unable to see something other people can see
- Yes No NA Sees worse at the end of the day (school-aged child)
- Yes No NA Difficulty copying material from a whiteboard in the classroom (school-aged child)
- Yes No NA Cannot see well when looking at distant objects such as whiteboards in the classroom (school-aged child)

If you answered "YES" to any of the above statements, make an appointment with your child's health care provider or eye doctor right away!

Why Does This Matter?

- Your child may still have an eye or vision problem . . . even if you answered “NO” to all questions.
- Having both a vision screening and an eye examination by an eye doctor is recommended throughout childhood to make sure your child has the best vision possible.
- Vision screening is done in the community where you live and is not an eye examination.
- Vision screening is done to find children who would benefit from an eye examination.
 - The person screening your child’s vision will tell you if your child should have an eye examination.
 - Only eye doctors do eye examinations to give you a diagnosis and to tell you if your child needs treatment, such as prescription eyeglasses.

Vision screening and an eye examination by an eye doctor is important to help your child have the best vision possible if your child does not pass vision screening.

- | | |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Has someone (e.g., school nurse, primary health care provider, Head Start person) screened your child’s vision? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, did the person screening your child’s vision recommend an eye examination by an eye doctor? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, did you take your child to an eye doctor for an eye examination? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Has your child ever had an eye examination by an eye doctor? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, did your eye doctor ask you to bring your child back for a follow-up visit? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, did your child have a follow-up visit with the eye doctor? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Does someone at your primary health care provider’s office screen your child’s vision at each well child visit? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | If no, are you comfortable asking someone to screen your child’s vision? |

When someone in the community screens your child’s vision and recommends an eye examination by an eye doctor, take your child to an eye doctor, and follow the eye doctor’s suggestions, including buying prescription eyeglasses, if needed, and follow-up visits.

Prevent Blindness recommends that:

- Newborns have their eyes checked while still in the hospital nursery.
- Infants have their eyes checked at each well-child medical visit or by Head Start staff if the child does not yet have a medical home.
- Children ages 1 and 2 years have their eyes checked or screened with an instrument at each well-child medical visit or by Head Start staff if the child does not yet have a medical home.
- Children ages 3, 4, and 5 years receive vision screening with an instrument or an eye chart using LEA SYMBOLS® or HOTV letters.
- Children ages 6, 8, 10, 12, and 15 years receive vision screening with an eye chart using Sloan Letters, not Snellen letters.
- Children receiving referrals from a vision screening should have an eye examination by an eye doctor, follow treatment suggestions, and have follow-up eye doctor visits as recommended by the eye doctor.
- Talk to your health care provider or take your child to an eye doctor for an eye examination if you have concerns about your child’s vision.

1. How do I make an appointment to see an eye doctor?

Please see the “*Finding Eye Care for Yourself and Child*” handout. www.preventblindness.org

2. How will I pay for eye care?

Please see the “*Financial Assistance*” handout www.preventblindness.org

3. What will happen at the eye exam?

Review these informational videos as examples about what to expect at the eye examination.

AAPOS: What to Expect at the Pediatric Ophthalmologist. Video from the American Association for Pediatric Ophthalmology and Strabismus – <https://youtu.be/v7UCn6npC20>

Your Child’s Eye Exam ft. Dr. Tracey Strombeck. Video from Prevent Blindness Wisconsin – www.youtube.com/watch?v=ebzOAI9mjug

4. What questions do I ask the eye doctor?

(This information is adapted from the American Printing House for the Blind – www.familyconnect.org/info/after-the-diagnosis/working-with-medical-professionals/questions-to-ask/135)

- What is the diagnosis?
- What caused the eye problem?
- Was my child born with it?
- Is it an inherited condition?
- Will it get better?
- Will it get worse?
- What is the treatment?
- Are there any other problems associated with this condition?
- Can you tell me how much my child can see?
- Are there restrictions on my child’s activities?
- What else do I need to know?

5. How might an eye doctor treat my child’s vision problem?

Eye care doctors use many different treatments to correct a child’s eye problems. These treatments may be used alone or in combination with other treatment. Examples include:

Prescription Eyeglasses

Glasses can help your child to see clearly if your child is farsighted, nearsighted, or has astigmatism. Glasses can also help correct a focusing problem or help stop an eye from turning.

Medications

Eye drops or ointments are used to treat infections, glaucoma, and sometimes even strabismus or amblyopia (refer go Glossary for definitions: www.preventblindness.org/glossary).

Patching

Patching one eye is common in treating amblyopia. If patching is difficult, sometimes special eye drops can be used.

Surgery

Surgery may be needed to adjust an eye muscle if strabismus exists, remove the lens in the front of the eye if it has a cataract, reduce the pressure of glaucoma, or halt vision loss due to diabetic retinopathy.

Eye Exercises

Prescribed vision therapy or eye exercises may improve focusing and help the eyes move better and work together. Ask your eye doctor if your child should have vision therapy or do eye exercises.

For more information, visit “*Your Child’s Sight*” at Prevent Blindness: www.preventblindness.org

References:

- American Association for Pediatric Ophthalmology and Strabismus. (2019). *Eye terms & conditions*. <https://aapos.org/patients/eye-terms>
- Bright Futures/American Academy of Pediatrics (2017). Recommendations for preventive pediatric health care. https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf
- Clark, R. A. (2003) *Does your child really need glasses? A parent’s complete guide to eyecare*. Prima Publishing.
- 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. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4274336/pdf/oxp-92-06.pdf>
- 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://pediatrics.aappublications.org/content/pediatrics/early/2015/12/07/peds.2015-3597.full.pdf>
- Hagan, J. F., Shaw, J. S., Duncan, P. M. (Eds.). (2017). *Bright Futures: Guidelines for health supervision of infants, children and adolescents* (4th ed.). American Academy of Pediatrics. https://brightfutures.aap.org/Bright%20Futures%20Documents/BF4_Introduction.pdf
- Simon, J. W., & Calhoun, J. H. (1998). *A child’s eyes: A guide to pediatric primary care*. Triad Publishing Company.
- Vaughn, W., Maples, W. C., & Hoenes, R. (2006). The association between vision quality of life and academics as measured by the College of Optometrists in Vision Development quality of life questionnaire. *Optometry*, 77(3), 116-123.



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