VISION SCREENING

Vision screening and eye examination are essential for detecting visual impairment. Conditions that lead to visual abnormalities may lead to inadequate school performance and prevent students from obtaining maximum benefits from their educational experience.

Because all children are required to have a physical examination when they first enter school, it was determined that this requirement would provide adequate screening for kindergarten students. Therefore, the only health screening required for pupils will be for sight and hearing defects in grades 3, 7, and 10 [check records for religious exemption]. Arrange screening to be conducted early in the school year.

All children, third grade and above, should have a vision screening within 60 administrative working days of initial enrollment to determine if further evaluation is needed, unless prior testing is documented as part of the school Entrance Health form, Part II.

Parents of all students who do not perform satisfactorily on a vision screening and subsequent re-test should be notified by way of a letter, recommending further evaluation by an eye care professional. It should be understood that vision screening is designed only to identify students who may need further attention, it is not intended for diagnostic purposes nor should a diagnosis be made.

Please note that vision screening prior to a Child Study follows a different course.

For Equipment, Procedure, and Documentation – see Virginia School health Guidelines, pgs. 225-226.

Ref: Virginia School Health Guidelines, May 1999, pgs. 222-228.Code of Virginia, Section. 22.1-273.Superintendents Memo. No. 159, August 19, 1987.

OPTICIANS WHO ARE MEDICAID PARTICIPANTS

(Call for details of participation with client's plan)

Charlottesville Eye Associates 110 S. Pantops Drive Charlottesville, VA 434-977-6697

Covert, Lord and Mueller 441 Westfield Road Charlottesville, VA 434-973-5361

Spectacle Shop 1047 Millmont Street (this location only) Charlottesville, VA 434-979-7730

OPHTHALMOGISTS

Blue Ridge Ophthalmogy Ashley Schauer Andrew Collins 626 Berkmar Circle Charlottesville, VA 434-295-3227

Updated: 8/2006

(School Letterhead)

Dear Parent/Guardian:

Each year a vision screening is conducted on all Third graders in our school, as mandated by the Commonwealth of Virginia. The results of which are as follows:

Child's name_____

Date of screening _____ Date of re-screening _____

Right eye _____

Left eye _____

Ideal results for children of this age are 20/20 or 20/30. As this is a screening, not a diagnosis, I recommend that you have your child seen by an eye care professional to further evaluate these results.

If you have any questions regarding the screening procedures, or findings, or if you have any problems making an appointment for your child, please contact me at the school.

When your child has had an eye examination, please have the doctor or clinic complete the form at the bottom of this page and return it to the school. Thank you.

School Nurse

Date

Doctor or Clinic: Please complete this form and return it to me at the above address.

I have examined ______ and found the following:

and have made the following recommendations: _____

Date: _____

Signature: _____