



**August 2003**

**Fact Sheet: The difference between vision screenings and comprehensive eye examinations**

**Vision screenings:**

- Are conducted by school nurses, pediatricians and obstetricians and are very different than the eye exams performed by an optometrist or ophthalmologist.
- Only test for visual acuity in most cases. Using a Snellen Chart, children are asked to identify letters placed 20 feet away that a person with “normal” vision is expected to identify.
- Can be effective at indicating a potential need for further evaluation.

**Comprehensive eye examinations:**

- Are conducted by doctors of optometry and ophthalmology.
- Measure vision at all distances, eye formation, color recognition, eye-hand coordination and visual alignment as well as diagnose eye diseases.
- Allow eye care professionals to diagnose and immediately begin treating any complications.

**Vision screenings have limitations:**

- Children who receive a 20/20 rating from a screener may not have good vision. A child may be able to see letters placed 20 feet away, but this does not mean he/she doesn't have other eye problems such as eye disease, farsightedness (inability to see close-up) and eye coordination problems.
- There may not be a standard or criteria for children to pass a school vision screening.
- School-based volunteers are not required to undergo the same training as eye care professionals, and have significantly less resources than a doctor's office.

**Vision screening statistics:**

- 6 to 11% of children who pass a screening actually have a vision problem needing correction by an eye doctor (Studies including those reported by American Academy of Ophthalmology and *Journal of Pediatric Ophthalmology and Strabismus*).
- 40 to 67% of children who fail a vision screening do not receive recommended follow-up by an eye doctor (Studies including those reported by American Academy of Ophthalmology and *Clinical Pediatrics*).
- Vision screenings were not attempted on more than 60% of the three-year-old children in pediatricians' offices (American Academy of Pediatrics study).

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### Working to maximize screenings:

The Optometric Physicians of Washington (OPW) recommends those individuals who conduct screenings consider adding the following to their screening battery:

<b>Add:</b>	<b>To Evaluate:</b>
Plus Lens Test	Farsightedness
Stereopsis Test	Amblyopia, Eye Turns, Eye Coordination
Observational Checklist distributed to school teachers by school nurses and to parents by pediatricians and nurses	For signs of “hard to find” vision problems that affect learning such as eye tracking, coordination and focusing

A screener can purchase the first two tests for approximately \$170. The tests should add only about 40 seconds to each screening, but allow the screener to evaluate for much more than distance visual acuity alone.

### For more information, contact:

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