

Confirmation: Children's Vision Screening

Indianola Public Schools
Indianola Elementary School
P.O. Box 119
Indianola, OK 74442

Date: Fri, 10/9/2020
Start Time: 8:30 AM

Please Read the Steps Below for a Successful Screening

Step by Step Vision Screening Preparation (page 2)

Vision Screening Invoice (attached)

Payment of the administrative fee can be given to the screener or mailed to the address above. Vizavance also accepts payments online at www.vizavance.org. Use the RESOURCES tab to select School Payment.

Vision Screening Exclusion Form for Parents (attached)

This page can be sent home prior to the screening when schools do not have a signed health screening form as part of their enrollment packet. Signed exclusion forms are to be kept in the student's school file.

Seemore Form (page 3)

This shows the child's vision screening results and is given to teachers for placement in the student's weekly folder to be sent home to parents. It is not a referral letter, which is part of the post screening paperwork.

For Immediate Release (attached)

This Press Release page can be submitted to your local newspaper. It includes key information on the work of Vizavance and its mission of "Advancing Children's Education Through Better Vision."

Excel / CSV Student Information File (page 4)

This example shows how to easily prepare the student information file necessary for uploading each child's information to the web-based IRIS Program prior to the vision screening.

Accessing Screening Results Online (attached)

This page shows step-by-step illustrations for accessing screening results online at www.vizavance.org

Step by Step Vision Screening Preparation

Student Information

Vizavance processes its vision screenings using the web-based IRIS Program. For results to be made available, basic information for each child must be entered correctly into the IRIS Program. Please use these column headings to prepare a SINGLE school file (**Excel** or **CSV**) of all students to be screened. For more on preparing your school's student information file, see page 4.

Student ID	First Name	Last Name	Grade	Birth Date	Gender	Teacher
------------	------------	-----------	-------	------------	--------	---------

Please Use IRIS traditional **Grade** names (PK, K, 1st, 2nd, 3rd, etc.) when preparing the Excel or CSV file. Email your **Excel** or **CSV** student information file to our designated email address: iris@vizavance.org

NOTE: PDF FILES OR PAPER RECORDING FORMS CANNOT BE IMPORTED INTO THE IRIS PROGRAM.

Internet Availability

Your vision screener will need access to the school's internet service in order to use the web-based IRIS Program. We appreciate your assistance in making this available during the vision screening.

School Volunteers

We ask that you provide at least two school volunteers in addition to any Vizavance volunteers. We will reach out to the local Masonic Lodge in your community, requesting Mason volunteers, if available. School and Mason volunteers working together help the vision screening process run more smoothly.

Accessing Screening Results

Once screening results have been finalized, they can be obtained by going to www.vizavance.org. Click on the RESOURCES tab at the top, then click on the **School Vision Screening Results** tab and use your contact email address and password to access your school's screening results.

Note: If the contact information for your school needs to be changed, please contact Vizavance and we will update your information as needed.

The Seemore Form

Following the screening, this screening results form will be given to each teacher for placement in the student's weekly take-home folder. **The Seemore Form is not the child's referral letter.** Referral letters are included in the post screening paperwork and should be provided to parents in a timely manner. This will allow parents valuable time needed for scheduling an eye exam.



"Seemore"

SCHOOL: _____ TEACHER: _____ GRADE: _____

to the parents or guardians of _____ DATE: _____

Your child was given a vision screening by a VIZAVANCE Certified Vision Screener.

Screener: _____ Utilizing CHART or SPOT CAMERA

PASS: YES _____ NO _____

Anisometropia – This condition can adversely affect the development of binocular vision in infants and children. The brain will often suppress the vision of the blurrier eye in a condition called Amblyopia or "Lazy Eye."

Anisocoria – This condition is an asymmetry of pupil diameter where the pupil of one eye differs in size from the pupil in the other eye. Your pupil is the black circle in the center of your eye; they are usually the same size.

Astigmatism – The cornea has an abnormal curve causing out-of-focus vision. It is a condition in which the eye does not focus light evenly onto the retina, the light-sensitive tissue at the back of the eye.

Gaze / Strabismus – Also known as "Cross Eyed" where eye measurements are misaligned. Eyes are not directed to an object simultaneously. Sometimes the eyes deviate outward and sometimes inward.

Hyperopia – Also known as "Far-Sightedness" where distant objects may be seen more clearly than objects that are near, but can be corrected with glasses.

Myopia – Also known as "Near-sightedness," a common type of refractive error where close objects are clear and distant objects appear blurred. It can be treated with glasses.

Stereopsis – PASS Test 2 Stereopsis Screening – The visual perception of depth, three-dimensional space, produced by the reception in the brain of visual stimuli from both eyes in combination.

Near Vision – A vision test that identifies difficulties seeing at close range. We utilize the Sloan Letter Card at 16 inches.

Utilizing COLOR VISION TEST

Color vision screening is for informational purposes only; No referrals are issued for color vision screening.

PASS: YES _____ NO _____

Vizavance utilizes Color Vision Testing Made Easy by Waggoner Diagnostics. Also known as "Color Blindness," a genetic color vision defect: Red/Green, Blue/Yellow. This genetic defect will not change over time and is usually symmetrical. For additional resources visit www.vizavance.org/colorvision

THIS IS NOT A REFERRAL LETTER. IF YOUR CHILD DID NOT PASS THE VISION SCREENING, YOU WILL RECEIVE A REFERRAL LETTER FROM YOUR SCHOOL ADMINISTRATOR.

This is not a diagnosis. A referral letter is a recommendation to follow up with an eye care professional.

****PLEASE NOTE****

Even though your child may have passed the criteria, your child's eyes are continuing to develop, so we encourage a yearly vision screening.

In compliance with the Oklahoma Child Vision Screening Act, the chart method is required for first, second, and third grades.

For more information: www.vizavance.org

Vizavance - 50 Penn Place, Suite R110, Oklahoma City, Oklahoma 73118 - (405) 848-7123

Excel / CSV Student Information File

Vizavance processes its vision screenings using the web-based IRIS Program. Basic information for each child must be entered correctly into the IRIS Program. Please use IRIS accepted traditional **Grade** names (PK, K, 1st, 2nd, 3rd, etc.) when preparing your school's **Excel** or **CSV** file. Email your student information file to our designated email address: iris@vizavance.org. The example below shows the columns used for setting up an Excel / CSV format student file.

NOTE: PDF FILES OR PAPER RECORDING FORMS CANNOT BE IMPORTED INTO THE IRIS PROGRAM.

	A	B	C	D	E	F	G
1	Student ID	First Name	Last Name	Grade	Birth Date	Gender	Teacher
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

A CSV template can be downloaded from https://iris.vizavance.org/files/student_upload_template.csv