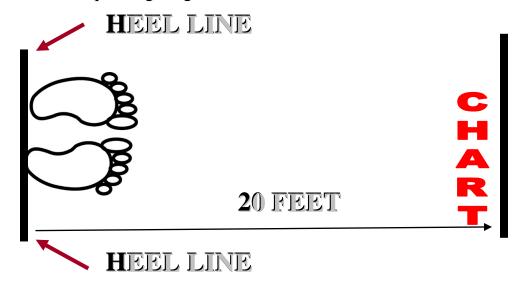
Child Health and Disability Prevention (CHDP) Program State of California CMS/CHDP Department of Health Care Services



Key Points

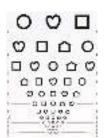
- Heel line must be marked at 10 or 20 feet depending on whether the screening chart is for the 10 foot or the 20 foot distance.
- Heel line should be midline to eye chart marked on the floor, not on the wall.
- Vision screening area must be out of traffic area, free from distractions, and have adequate lighting over the chart.



- Eye chart must be adjustable to the height of the child with the eye level of the child at the 20/40 line (6 yrs or older) or 20/50 line (3-5 years). Note: Make eye charts adjustable by placing a Velcro strip vertically on the wall, and Velcro strips on the back of each eye chart.
- Each eye is then screened separately: Right eye first, then left eye, then both eyes. A standard routine (right, left, both) avoids confusion and facilitates recording.
 - □ Record Snellen results at the time of the test.
- If the patient wears glasses, always test with the glasses on.
- Do an outer inspection of the eyes. Remember the ABC's of vision.
 - $\hfill\Box$ A for appearance: redness, discharge, etc.
 - □ **B** for behavior: tilting of the head, squinting, etc.
 - □ C for complaints: by patient or parents

Recommended by AAP:









Not recommended by AAP:



