

problems at an earlier age.

## District 50 Hawaii Lion Protocol 3 Vision Screening Program Parent Consent and Screening Passults Form

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Teacher Name

CONFIDENTIAL FAIGH CONSEIN AND	Screening Results Fulfil
Dear Parents/Guardian of	egal name <u>No Nicknames</u>
(Please circle child's age or grade)	
Age: 2 3 4 5 6 or older Grade: Pre-K K	1 2 3 4 5 6 7 10
Your consent is necessary for a free vision screening b on Th Your child will be asked to identify letters or symbols usin will determine if vision problems may exist. Students who	his is not eye examination, and no eye drops are used.  ng eye charts, or a hand-held photoscreener/autorefractor
I <b>consent</b> to having the Hawaii Lions screen my child preliminary, are not a diagnosis of my child's vision, a hold the Hawaii Lions responsible for any misinformation following the screening.	d's vision. I understand that screening results are and that not all vision problems are detectable. I will not ation. The Lions do not retain any personal information
Parent/Guardian Signature	Date
Photoscreener/Autorefractor Results	Eye Chart Visual Acuity (VA) Results
You <b>Passed</b> the Photoscreener Test	VA Age 3yr 4yr 5yr & up Threshold 50 40 32  Right eye  UTT
(Affix referral label here)	/= Identified 3 or more symbols/letters - Pass X = Identified less than 3 symbols/letter - Refer
UTT = Unable to Test (UTT for Pre K is a Refer)	UTT = Unable to Test - Refer
Wears Glasses – Photoscreen with Glasses On	
Use "/" mark for pass or √ for UTT or Glasses	
Screen	ning Results
Your child <b>Passed</b> the Vision Screening	
Your child should <b>see an Eye Doctor</b> for a this report to your Eye Doctor and/or your contact.	comprehensive eye examination. Please give child's Primary Care Physician.
Notice to Parents of Students V	Vho Are Being Referred
The vision screening shows potential vision deficiend Normal vision is critical to your child's learning proce	

The Hawaii Lions Foundation has a program to assist students' families who don't have sufficient medical/vision insurance. The Foundation can assist with costs for an eye examination and a pair of eye glasses for families who qualify. Please ask your school for information to contact the Lions Club.