Vision Screening Schedule

Pre-School—All Students—Near and Far Distance Acuity, Random Dot E.
Kindergarten—All Students—Near and Far Distance Acuity, Random Dot E.
First Grade—All Students—Near and Far Distance Acuity, Random Dot E.
Second Grade—All students new to the district, Special Education.
Near and Far Distance Acuity, Random Dot E.
Third Grade—All Students—Near and Far Distance Acuity, Random Dot E.
Fourth Grade—All students new to the district, Special Education.
Near and Far Distance Acuity
Fifth Grade—All Students—Near (optional) and Far Distance Acuity,
Sixth Grade—All students new to the district, Special Education.
Near and Far Distance Acuity
Seventh Grade—All Students—Near (optional) and Far Distance Acuity
Eighth Grade through 12th Grade—All students new to the district, Special Education.
Near (optional) and Far Distance Acuity

Recommended and required guideline from the MDHSS Vision Screening Guidelines.

Revised September 28, 2016
Vision Screening

Near Vision

Vision Card  (With 16” Measuring Cord)

Near vision screening is important for the young child. Screening at the earliest age possible is important.

Using the Lea Symbols /Numbers Vision Card:

(If the child wears glasses, screen with the glasses on)

1. Display the identifier flash cards and establish the name of the pictures that is appropriate for the child’s level of learning. Younger children will use the shapes symbols. Older children will use the number side of the vision card.

2. Hold the card at the appropriate distance from the child’s line of vision.

3. Begin with binocular testing—using the center portion of the vision card. Do not allow the child to lean their head or torso forward. Watch for tilting of the head, squinting, or closing of one eye.

4. Ask the child to name or read the symbols or letters on each line as directed. If the child is able to read greater than 60% of the optotypes on the line, the child passes. If the child does not pass, they should be rescreened at a later date. Record the results.

5. After binocular testing, proceed with testing each eye separately. When testing the right eye use the symbols grouped on the left side of the card. When testing the left eye, use the symbols on the right side of the card. Use an occluder that is comfortable for the student. Record the results.

Referral Criteria:

Kindergarten—Each eye must see at least the 20/40 line.

Grades 1st—12th—Each eye must see at least the 20/30 line.
Refer if there is a two-line difference for all grade levels.


St. Joseph School District
Health Services

Vision Screening:

Random Dot E

This vision screening procedure should be used as soon as possible for the very young child. This is a stereopsis vision screening.

(To better understand how the screening works—you may want to put the polarized glasses on yourself and complete the steps of the screening.)

Random Dot E kit includes three testing plates, 2 pair of polarized glasses, and an instruction sheet. Do not clean the glasses with alcohol, as that will damage the lens.

The testing plates include a raised embossed E used for training purposes, a test plate that has an array of dots but does not form an E even with the polarized glasses in place, and a test plate that has an array of dots and does form an E with the polarized glasses place.

Make sure that the distance between the child and the test card is 40 inches.

A bright-lighted room is best with no reflections on the test cards.

1. Have the child put on the polarized glasses. If the child wears glasses, the larger pair of polarized glasses should be placed over the child’s regular glasses.
2. Show the child the model E raised surface test plate—and ask the child to tell you what they see.
3. Show the child the “blank test plate” (the two test plates side by side) and ask the child to point to the plate with the “E”.
4. Using the “blank test plate” and the matching test plate with the “E” show the child the two plates and ask which plate has the “E”. Shuffle the plates behind your back and repeat the procedure four (4) more times. Holds the plates side by side or above and below each other. Vary the position.
5. The child should correctly identify the “E” four out of five times. Record the results.

Be sure to hold the test plate with the “E” upright. Try to prevent any glare on the face of the test plates.

Referral Criteria:
If the child cannot correctly identify the “E” four out of five times, refer to the eye doctor.


St. Joseph School District
Health Services

Vision Screening

Far Vision—Chart Screening Method

Visual acuity refers to the sharpness of one’s eyesight. Acuity is reported as a fraction.

Gather all needed equipment—Good-Lite display unit, various cards, Occluder.

Mark off the appropriate distant according to the screening chart.

Make sure the room is well lit. Choose the appropriate chart for the child’s age group and level of learning. Have the display unit at eye level if possible.

If the child wears glasses—test with glasses in place. (Indicate on child’s health card “with glasses”.

1. Have the child position their heels on the line/indicator mark on the floor.
2. Instruct the child to keep both eyes open, cover one eye with occluder of choice, and the read the selected letter or line of letters with the uncovered eye.
3. When screening, start at the 20/50 line and move down to the 20/20 line, then move upward. You may or may not use the “mask” to assist with the screening.
4. The child must identify or match greater than 60% of the letters on the line. Watch carefully to observe the child for peeking from the occluder, tilting of their head, or squinting.
5. If the child is unsuccessful, he or she should be rescreened at a later date, before a referral is made.
6. Record all information on the child’s health card and other forms as needed.

Referral Criteria:

The child must identify or match greater than 60% of the ototypes on the critical line. Refer if the findings indicate a two-line score difference between the eyes.
