

SCORING

Score **3 points** for each item checked – numbers 1 – 30

Score **2 points** for each item checked – numbers 31 – 37

Score **1 point** for each item checked – numbers 38 – 43

REFERRAL CRITERIA

Refer any student scoring 15 points or higher.

15 – 20 points: Possible functional visual problem

20 – 30- points: Probable functional visual problem

Over 30 points: Definite functional visual problem

Child Symptom Checklist

(To determine whether a vision evaluation should be administered)

Has your child ever reported or have you or anyone else noticed any of the following?

1. _____ Skips lines while reading or copying
2. _____ Loses place while reading or copying
3. _____ Skips words while reading or copying
4. _____ Substitutes words while reading or copying
5. _____ Rereads words or lines
6. _____ Reverses letters, numbers, or words
7. _____ Uses a finger or marker to keep place while reading or writing
8. _____ Reads very slowly
9. _____ Poor reading comprehension
10. _____ Difficulty remembering what has been read
11. _____ Holds head too close to paper when reading or writing (within 7-8 inches)
12. _____ Squints, closes, or covers one eye while reading
13. _____ Unusual posture or head tilt when reading or writing
14. _____ Headaches following intense visual activities such as reading
15. _____ Eyes hurt or feel tired after close work
16. _____ Feels unusually tired after completing a visual task
17. _____ Double vision
18. _____ Vision blurs at distance when looks up from near work
19. _____ Letters or lines "run together or words "jump" when reading
20. _____ Print seems to move or go in and out of focus when reading

21. _____ Poor spelling skills
22. _____ Writing is crooked or poorly spaced
23. _____ Misaligns letters or numbers
24. _____ Makes errors copying
25. _____ Difficulty tracking moving objects
26. _____ Unusual clumsiness, poor coordination
27. _____ Difficulty with sports involving good eye-hand coordination
28. _____ Eye turns in or out
29. _____ Sees more clearly with one eye than the other
30. _____ Feels sleepy while reading
31. _____ Dislikes tasks requiring sustained concentration
32. _____ Avoids near tasks such as reading
33. _____ Confuses right and left directions
34. _____ Becomes restless when working at his/her desk
35. _____ Tends to lose awareness of surroundings when concentrating
36. _____ Must "feel" things to "see" them
37. _____ Carsickness
38. _____ Unusual blinking
39. _____ Unusual eye rubbing
40. _____ Dry eyes
41. _____ Watery eyes
42. _____ Red eyes
43. _____ Eyes bothered by light