

# Criteria for Visual Testing within the Healthy 4 year old Check

## Guidelines for assessment of visual acuity in four year olds

Amblyopia or lazy eye occurs in 2% of the paediatric population. It is treatable during the cortical plasticity up until approximately 8 years of age. If undetected it can lead to permanent loss of vision in the affected eye.

Visual acuity should be assessed with an illuminated Sheridan Gardiner chart at six meters. The six meters can be achieved with the patient looking into a mirror three meters away. The distance is critical to accurate measurement and the child's eyes should be exactly three meters in front of the mirror when sitting under the vision box.

The Sheridan Gardiner linear chart is the most accurate method of acuity assessment in four year olds but if the child is unable to perform this, then single letters should be used from the Sheridan Gardiner Booklet.

Each eye is tested individually and covering one eye with a hand is not accurate. Some form of occlusion must be used.

### Criteria for referring children

- Acuity that is less than 6/9
- Unequal acuity between the two eyes

## Guidelines for assessment of strabismus

Strabismus or turned eye occurs in up to 5% of the paediatric population. The most serious side effect can be amblyopia or loss of vision in one eye.

There are two methods of detecting strabismus. The first method is observation of the corneal reflections and the second method is the cover test. The cover test is really the definitive test and should be performed for near and distance.

### Criteria for referring strabismus

- Any strabismus observed during testing
- An abnormal head posture, marked face turn or head tilt
- Ptosis
- Nystagmus

It is absolutely essential that any abnormality in ocular alignment or visual acuity be detected at this four year check or permanent loss of vision may occur if the condition remains untreated.