INTRODUCTION AND ORIENTATION TO THE SCHOOL SCREENING PROGRAM

The School Vision Screening Program is a clinical experience to which you, as third year optometry students, will be assigned. It has been conducted in its present form since 1974. Although school vision has been a prime optometric concern since Blum and The Orinda Study in the mid-1950’s, Indiana’s screening system is unique in its methods and in the scope of the program.

The purpose of the present screening program is threefold: public relations, benefits to the children involved and education. The aspect of public relations is obvious as we promote Indiana University and the School of Optometry, as well as our profession, on a statewide basis. The benefits to the children not only include benefits to their visual system but also a positive effect on their school performance. The educational purpose, although not obvious to the public, is probably the most important. With the use of such a classroom, you can be exposed to a wider and more varied population than is not possible otherwise. At the same time, you will sharpen your basic clinical skills.

The educational goals are many. The time spent on screenings will improve your communication skills, increase your efficiency in basic techniques, and expose you to those personalities, visual complaints, and variants of normal findings encountered in the school-aged population. Up until this time, the emphasis has been on the unusual and/or abnormal conditions rather than normal, which must be recognized and understood if deviations and subsequent problems are to be detected with any accuracy. The testing of large volumes of children forces you to become almost automatic and ultimately more efficient in your testing through sheer repetition. This enables you to pay more attention to your patient’s responses. By learning to instruct kindergarten, first and third graders, you will communicate more effectively with patients at all levels.

REQUIREMENTS OF THIS ROTATION

1. As part of the third year clinical requirements, each student will be assigned to a total of one-two screenings conducted during the fall semester.
   a. The faculty has agreed to permit you to make up any exams, assignments or labs missed provided arrangements are made individually with each faculty member involved, in advance!
   b. We only make daily trips (no overnight trips). Most of the daily trips leave promptly at 8:30a.m. (some do differ, so look at the leave time) and return before 1:00pm.
2. **Equipment you are required to bring:**
   
   a. Diagnostic Set (Ophthalmscope/Retinoscope) with two fully charged handles- please be sure they are charged before each screening
   b. Penlight
   c. Cover Paddle
   d. P.D. Stick
   e. Horizontal Prism Bar
   f. Clipboard with pen

3. **Clinic Dress**

   Clinic dress is required. This means white clinic jacket with name badge. No blue jeans, tennis shoes or sandals permitted. Arriving for the screening not properly dressed will cause you to be sent home with the below mentioned policies being enforced!

4. **Policies on Grading and Absences:**

   a. You will be graded on your performance during the screenings. Each screening will be the equivalent to three (3) patient encounters. Your grade for the screenings will be factored into the second eight weeks of the fall semester. You will be graded on your ability to function as a member of a team, communication skills, attitude, optometric technique, and proficiency.

   The following is an example of the grading form used during school screenings. It is your responsibility to complete the top portion and to give it to the consultant before you leave for the day. **NO** grading sheets will be accepted after the date of the screening!
### Screening Evaluation

**Student Name:** ______________________________  **Date:** ________________  

**School System:** ______________________________

<table>
<thead>
<tr>
<th>N=</th>
<th>Below Obs</th>
<th>Expected Level</th>
<th>At Expected Level</th>
<th>Above Expected Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F</td>
<td>D</td>
<td>C</td>
<td>B</td>
</tr>
</tbody>
</table>

1. Ability to work as a team member  
   - N 0 1 2 3 4

2. Obtains data efficiently  
   - N 0 1 2 3 4

3. Proficient in all testing procedures  
   - N 0 1 2 3 4

4. Maintains professional attitude  
   - N 0 1 2 3 4

5. Communicates well  
   - N 0 1 2 3 4

**Comments:** __________________________________________________________

__________________________________________________________

**Final Grade**____________

**Consultant Signature(s)**________________________________________

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Your final grade for the screening date is not necessarily a sum of the items on the sheet; it is dependent upon your overall performance. Therefore your final screening grade for the whole rotation is not necessarily dependent upon these grade sheets alone rather your overall performance during the rotation. I will turn in a grade for you to Dr. Kohne, who has the authority to change that grade based on input from other doctors if that is, deemed necessary.
b. Given that a screening team is made up of a limited number of interns, everyone (I, the team and the school system) will be counting on each of you to make your assigned screenings. Given the importance of attendance, one (1) unexcused absence equals that intern not receiving a grade higher than a D for the school screening rotation; two (2) unexcused absences will result in that intern receiving a grade of F for the school screening rotation. An example of an excused absence is an illness with a doctor’s note. In all cases, however, the validity of an absence is ultimately determined by me. If you miss a screening for any reason you will be assigned to another screening. If you miss the departure time from the school of optometry you will be expected to be at the site within 30 minutes of our arrival time. Failure to arrive before then will result in a decrease of one letter grade for the screening rotation. In order for you to receive credit for the screening you must be at the screening no later then one hour of our arrival time. Hence, it is to your advantage to meet the unit at the screening site, if you miss the leave time from the school.

c. Swapping of screening times or having someone take your time is permitted as long as Laura Logan in the Pediatric department is notified no later than two days before the scheduled time and that the intern who is missing the time makes it up. Understand that if you agree to fill in for someone I can not give you another day off. Just count it as extra experience.

5. Scheduling

Each intern’s schedule is determined based on their clinic and didactic schedule before the first week of classes. If you have a problem with your scheduled day you must find someone to trade with and then inform Laura of the change. Creating a schedule for so many different people is extremely time consuming and we would appreciate adherence to this schedule.

6. Screening Form

Dr. Jeff Perotti has been instrumental in creating a scantron screening for the screening. We want you to be intimately familiar with this form..

Final thoughts

This program does not only benefit the communities we serve but it allows you to examine a large number of normal pediatric patients in a short time. The skills you learn during this program will transfer over to your clinical skills both in primary care and pediatrics.