



WHAT EVERY PARENT NEEDS TO KNOW: A SIMPLE SCREENING CAN SAVE A SIGHT.

The Facts:

- **19 million children worldwide are visually impaired**
- **80% of all visual impairment can be prevented or cured**, according to the World Health Organization
- **Amblyopia (lazy eye) is the #1 cause** of preventable, yet permanent vision loss in children in the USA
- **Early treatment is vital** — waiting or not getting a proper diagnosis could lead to permanent vision loss later
- **Lifelong Impact:** Amblyopic vision loss robs a person of career possibilities and affects quality of life

GET YOUR BABY'S VISION SCREENED STARTING AT AGE 12 MONTHS. The American Academy of Pediatrics (AAP) recommends instrument-based vision screening in the medical home to detect silent disease early, and routine eye chart testing when the child is able. Vision screening, before the baby can read an eye chart, is as much a priority as checking height and weight, or discussing nutrition, oral health, safety, and vaccinations.

Have vision checked in each eye separately as soon as your child can cooperate—usually age 4 or 5 years. **Childhood vision problems can be silent, sneaky thieves of sight** that can hide from the most attentive parents & pediatricians.

About 1 in 20 children will have a serious eye problem that needs to be treated by a specialist, a pediatric ophthalmologist. Children's Eye Foundation supports research and training of pediatric ophthalmology and strabismus-expert physicians, which means you can turn to CEF and find an army of more than 1,800 experts from the American Association for Pediatric Ophthalmology and Strabismus (AAPOS). **AAPOS is a really long name for THE medical and surgical authority in kids eye care and adult strabismus care.**

Every child deserves a life with good vision. Good vision helps a child learn about the world. **With early detection and expert treatment, it is within our reach to eliminate vision loss in hundreds of thousands of children.** No child should lose vision due to a preventable cause.

Lifelong Impact: Amblyopic vision loss robs a person of career possibilities and affects quality of life.

- Many occupations that depend heavily on stereo vision are not open to people who have poor depth perception that can result from amblyopia, such as: baseball player, waitress, architect, surgeon, dentist, barber, beautician, bartender, machinist, needle worker, airline pilot, bus driver, air traffic controller.
- Difficulties in eye hand coordination affect various activities of daily living, such stepping off a curb or step, crossing the street, driving or parking a car, throwing, catching or hitting a ball, or pouring into a container.

A SIMPLE SCREENING CAN SAVE A SIGHT.

Early detection and prompt, expert care give the best chance of preventing needless vision loss in children.



A PARENT'S CHECKLIST

- ✓ Get your baby's vision screened starting at age 12 months
- ✓ Have vision checked in each eye separately as soon as your child can cooperate-usually age 4 or 5 years
- ✓ Tell your doctor if your child's had an eye injury or if there is a family history of childhood eye disorders
- ✓ Be alert. Look for these signs and symptoms in your child:

Urgent – Call your doctor immediately

- White pupil (you see a white "glow" in the pupil in photos of your child)
- Large cornea in one or both eyes (the cornea is your eye's clear, protective outer layer)
- Glassy or white appearing cornea or change in color of the eye
- Eyelid swelling shut
- If your baby was less than 32 weeks gestation at birth, make sure that screening eye exams were done for retinopathy of prematurity

Notify your doctor soon (within days or weeks)

- Eyes don't line up (look crossed, turn out, or don't focus together)
- Childs says: "everything looks blurry", or "I see double"
- Redness in either eye that doesn't go away in a few days
- Lump, swelling, or drooping eye lid
- Child rubs eyes a lot
- Squints one eye closed in the sunlight or bright light
- Pus or crust in either eye
- Dancing eyes (flutter quickly from side to side or up and down)
- Eye pain, itchiness, discomfort (child says "my eyes are itchy" "my eyes hurt")
- Eyes are always watery
- Eyes that often appear overly sensitive to light
- Unequal pupils or noticable defect in pupil (the pupil is the black circle in the center of eye)

Tell your doctor at your next visit:

- Tilts head to one side or thrusts head forward at a funny angle when trying to see something
- Holds objects close to the eye to see
- Blinks more than usual
- Closes or covers one eye
- Uses finger to maintain place when reading
- Squints eyes to see clearly
- Headaches, nausea, dizziness (when doing closeup work, your child might say: "that's blurry" or "that's hard to see" or "I feel dizzy, "I feel sick", "I have a headache"
- Sitting unusually close to television, computer screen, or school chalkboard

QUESTIONS: TALK WITH YOUR DOCTOR ABOUT THESE TOPICS DURING WELL-CHILD CHECK-UPS:

- Is there a history of eye disorders in childhood (in parents or siblings)?
- Do your child's eyes appear unusual?
- Does your child seem to see well?
- Does your child experience difficulty with near or distance vision?
- Do your child's eyes appear straight or do they seem to cross?
- Do your child's eyes droop or does one eyelid tend to close?
- Has your child ever had an eye injury?