FAMILY EYE CARE

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Optometrist

- LEARNING RELATED VISION PROBLEMS
- VISION THERAPY

Patient Name: Date:

Address:

Pre-therapy Mid-therapy Post-therapy **Can read easily: _____ minutes, _____ hours**

Check the column which best represents each symptom:

| | Never | Seldom | Occasional | Frequently | Always |
|---|---|---|---|---|---|
| 1. Do you get adequate rest? | | | | | |
| 2. Blur when reading or writing | | | | | |
| 3. Double Vision | | | | | |
| 4. Headaches with reading, writing, or computer work | | | | | |
| 5. Words run together or appear to float on page | | | | | |
| 6. Tends to lose place when reading, repeats or skips lines | | | | | |
| 7. Falls asleep reading | | | | | |
| 8. Burning, itching, or watery eyes | | | | | |
| 9. Guesses when reading (inserts words with same first letter) | | | | | |
| 10. Difficulty copying from chalkboard/overhead/smart board | | | | | |
| 11. Doesn't like to read or write, avoids near work | | | | | |
| 12. Signs of eyestrain (rubbing eyes, tilt or turn head, covers eye) | | | | | |
| 13. Omits small words when reading | | | | | |
| 14. Difficulty with reading comprehension | | | | | |
| 15. Does your child have difficulty reading fluently? | | | | | |
| 16. Holds reading too close/gets too close while writing | | | | | |
| 17. Trouble keeping attention on reading | | | | | |
| 18. Writing is a struggle | | | | | |
| 19. Inconsistent size/spacing while writing | | | | | |
| 20. Difficulty completing assignments on time | | | | | |
| 21. Misaligns digits/columns of numbers/words | | | | | |
| 22. Difficulty with spelling or word recognition | | | | | |
| 23. Homework is a struggle | | | | | |
| 24. Says "I can't" before trying | | | | | |
| 25. Avoids sports/games | | | | | |
| 26. Poor/inconsistent in sports | | | | | |
| 27. Does not judge distance accurately | | | | | |
| 28. Clumsy, knocks things over, trips often, runs into things | | | | | |
| 29. Difficulty catching, kicking a ball | | | | | |
| 30. Does not handle change well (inflexible) | | | | | |
| 31. Does your child tend to get carsick or motion sick? | | | | | |
| 32. Disorganized | | | | | |