# Instructions on Completing VIP Gold Standard Examination Form For Children Wearing Glasses

(12/15/03)

# Gerry Two GSE Forms

There are two different forms for recording the results of the Gold Standard Examination (GSE). The yellow form (Gold Standard Exam – For Children with Glasses [VIP Form GG] should be used only for children who present wearing glasses. These instructions pertain to this yellow form for children who wear glasses. **NOTE:** If a child normally wears glasses but does not have them on the day of the examination, test the child on the WHITE form, (i.e., as if they do not have glasses).

# Instructions Common to Most Sections

# Ger Testing with or without Glasses

For each component of the exam, the form will indicate whether the child should be tested wearing or not wearing her/his glasses. Note that some tests, such as cover testing are conducted twice, once without glasses and once with glasses.

## Required and Conditional Items

Items that must be answered are on the left; items that must be answered conditional on the response to a required item are on the right.

# Marking Responses Categories

Put a mark ("X", " $\sqrt{}$ ", or similar mark) within the parentheses across from the words of the correct response. Do not circle the words. Keep the mark within the parentheses so that only one category has a response marked.

# Mumber of Responses Marked for each Item

Most "items" or questions are labeled individually (2.a, 3, 4, 5A, etc.) One response category should be marked, as categories are meant to be mutually exclusive and complete.

# 6. Unable and Can't Determine Options

For each examination procedure, examiners are asked to indicate whether the examination can be performed on the child. Generally, procedures that require a subjective response from the child and have a pre-test should be marked "Unable" if the child cannot perform the task and fails the pre-test. "Can't Determine" should be marked when the child's behavior is such that the procedure cannot be started (e.g., during cover testing or retinoscopy).

### Ser Incomplete Procedure

Examination procedures include an "Incomplete" response option. A procedure is "Incomplete" when it must be stopped (due to a behavioral problem, equipment failure, or lack of time) after the child has previously demonstrated that he/she is able to perform the task. For procedures in which each eye is tested separately, specify whether the procedure was "Incomplete" for each eye. Indicate the responses up to the point at which the test was interrupted.

### Ger Identification

The Coordinating Center provides labels for the GSE forms, one label for each page. Prepare the 9 labels needed for a GSE session before the session by attaching the labels in the Identification Box located on each page. If you need to examine a child for whom you do not have pre-printed labels, clearly print the child's VIP number, name, and date of birth in the Identification Box on each page.

# **Procedure-Specific Instructions**

# General Color Square Test (Item #2)

If the child fails the pretest, mark "Unable" and skip the questions on the green and blue squares (items 2b and 2c).

#### Ser Lensometry (Item #3)

If the child has single vision spectacles, indicate this in item #3, and record the prescription in items #3a and 3b. If the child has a bi-focal, indicate this in item #3, and record the prescription in items #3c through 3e.

- 1. Record the power of the spherical and cylindrical lenses to the nearest 0.25 diopter using two decimal places (.00, .25, .50, or .75).
- 2. If there is no cylinder, put a dash or zero in *each* of the fields for Cyl and Axis.
- 3. Be sure to circle the plus (+) and minus (-) sign!

#### Ser Visual Acuity (Item #4)

There are 2 binocular pre-tests; one with training cards and the other with the EVA monitor. Mark only one response.

Complete the VA for each eye with her/his glasses on. Enter the value for the Snellen fraction denominator provided by the Palm in Items 4a and 4b. If the testing is interrupted, mark the box(es) for "Incomplete".

## Determine if visual acuity re-test is required (Item #5)

The EVA system will tell you if a re-test is required. Visual acuity re-testing is required if the child failed the pre-test, if the test was incomplete or if the child's visual acuity is less than the age-specific norm. Indicate appropriately in item #5.

### Stereo Smile (Item #6)

Test the child with glasses on. If the child fails the pre-test, mark "Unable" and proceed to the cover test. If the child passes the pre-test, mark the last card for which the child correctly identifies 4 presentations. Mark only one response. However, if the testing is interrupted, check the box for "Incomplete" and the last card for which there were 4 correct responses.

### Cover Test (distance and near) (Items 7 through 10)

Distance and near cover testing are done twice, first without glasses, and then with glasses.

If the child will not allow the examiner to begin the test, mark "Can't determine" for items 7 through 10.

For both distance and near testing conducted without glasses, the examiner first determines if a tropia is present using the unilateral cover test. If a tropia is present on the distance cover test that is conducted without glasses, answer items 7A through 7D. If a tropia is present on the near cover test conducted without glasses, answer items 8A and 8D. The magnitude is measured for the total deviation using the alternating cover test. If the testing is interrupted, mark the box for "Incomplete" for each item that was not completed.

For both distance and near testing conducted without glasses, after checking for tropia, the examiner then determines if a phoria is present or absent. If a phoria is present on the distance cover test, answer items 7E and 7F. If a phoria is present on the near cover test, answer items 8E and 8F. The magnitude is measured using the alternating cover test. If the testing is interrupted, mark the box for "Incomplete" for each item that was not completed. Cover testing at that distance is then concluded.

Repeat the process of distance and near cover testing while the child wears her/his glasses.

## Service Versions (Item #11)

If the child will not allow the examiner to begin the test, mark "Can't determine."

If there is a tropia in non-primary gaze, complete items 11A and 11B on the right hand side of the form. These comment fields are for clinical use and will not be entered into the computer database.

### Mon-cycloplegic retinoscopy (Item #12)

Perform the test without glasses. For each eye, if the child will not allow the examiner to begin the test, mark "Can't determine".

Record the refractive error in standard prescription notation (either plus or minus cylinder form).

- 4. Record the power of the spherical and cylindrical lenses to the nearest 0.25 diopter using two decimal places (.00, .25, .50, or .75).
- 5. If there is no cylinder, put a dash or zero in *each* of the fields for Cyl and Axis.
- 6. If the refractive error is plano, also put a dash or zero in the Sphere field.
- 7. Be sure to circle the plus (+) and minus (-) sign!

An optical cross is provided in the "work space" for those who choose to use it. Examiners who use the optical cross must convert their work to standard prescription notation. Do not submit a form without standard prescription notation completed.

# Ger Anterior Segment (Item #13)

If the child will not allow the examiner to begin the test, mark "Can't determine." If there is a condition that warrants care and/or follow-up, mark "Abnormal" and complete item A on the right side of the form.

If the anterior chamber is too shallow for drops to be administered, mark that response on the data collection. Do not administer drops. (See below for "If Cycloplegic Drops are Not Administered")

*G* <u>Drops (Item #14)</u>

You may instill a drop of 0.5% proparacaine in each eye (this drop is optional). Instill two sets of VIP combination drops and mark each drop administered for each eye. Please note that <u>both</u> combination drops are required.

Write in the time that the last drop was given in Item#15.

# George Cycloplegic retinoscopy (Item #16)

Perform the test without glasses. For each eye, if the child will not allow the examiner to begin the test, mark "Can't determine."

Record the refractive error in standard prescription notation (either plus or minus cylinder form).

- 1. Record the power of the spherical and cylindrical lenses to the nearest 0.25 diopter using two decimal places (.00, .25, .50, or .75).
- 2. If there is no cylinder, put a dash or zero in *each* of the fields for Cyl and Axis.
- 3. If the refractive error is plano, also put a dash or zero in the Sphere field.
- 4. Be sure to circle the plus (+) and minus (-) sign!

An optical cross is provided in the "work space" for those examiners who choose to use it. Examiners who use the optical cross must convert their work to standard prescription notation. Do not submit a form without standard prescription notation completed.

# Ger VA Retest (Item #17)

If the Palm displays "No VA retest" then mark that response. If the Palm displays "VA retest" then mark that response, and test the visual acuity of each eye, following the Palm instructions. Test with full cycloplegic refraction in place. If one eye is worse than the other, please test the worse eye first. If there is no difference, begin testing with the right eye.

Indicate in Items 17A & 17B the VA for each eye by using the value for the Snellen fraction denominator provided by the Palm. If the testing is interrupted, mark the box(es) for "Incomplete".

Binocular Indirect Ophthalmoscopy (Items #18 & #19)

For each eye, examine each of the structures indicated. Mark "Abnormal" if there is a condition that warrants care and/or follow-up and complete items #18A and/or #19A as appropriate.

## 6. Extraordinary Findings (Item #20)

If the examiner has detected any clinically significant conditions that have not been previously identified on the Gold Standard Examination form, indicate "Yes" and specify the condition in item #20A.

#### Ser Examiner (Item #21)

Provide the first and last initials and VIP certification number.

### Ger Date of Exam (Item #22)

Provide the date of the GSE. Use leading zeros for month and day.

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Detach this page from the rest of the form and keep it in the child's VIP folder. Do NOT return this page to the Coordinating Center. This page should be used as a reference to respond to parents' questions.

#### Error Correction

Correct errors by drawing a single line through the incorrect response, filling in the correct response, and putting the date and the initials of the person making the corrections next to the correction.

# If Cycloplegic Drops are Not Administered

- <u>Drops</u>: Leave the time of administration of last drops blank. Mark the box(es) noting that no drops were given.
- Ger Cycloplegic refraction: Mark "Can't Determine" for each eye without drops.
- Binocular indirect ophthalmolscopy: Perform the evaluations that you can. If you do not have a sufficient view to make a determination of normal or abnormal, mark "Incomplete."

# Interrupted Examinations

If the child leaves the van before all Gold Standard procedures are completed and does not return, draw a line on the data collection form noting the last test completed and write "Child left here." Leave remainder of the responses blank except for the last two items specifying Examiner and Date of Exam.