

Reinvigorating Your  
Health, Hearing  
And Vision  
Screenings

# Health, Hearing and Vision Screening Components

Health Record

Hearing

Vision

Dental

Immunizations

# Functional Vision

Components may be presented in any order.

Please use a medical penlight. Other lights are too bright to shine directly into the eye.

Dark eyes may be harder to screen.

You may need to ask the parent to darken the room.

# Functional Vision

## Blink Reflex

Birth to 12 months only. Move open hand from about 18 inches from infant's face, toward the nose. Do not create air movement by moving too quickly. Pass if the child blinks in response to the approaching hand.

# Functional Vision

## Reaching

Notice if the child can reach appropriately for a desired object placed in front of and off to each side of him/her.

# Functional Vision

## Pupillary Response

Tests the degree to which the pupils respond to light. Look at the pupils before beginning. Use a pen light and shine it very briefly from a distance of about 12 inches into one eye to observe if the pupil constricts. Look for the pupil to shrink and return to original size. Repeat for other eye.

# Functional Vision

## Corneal Light Response

Detects eye deviation. Direct the penlight to the bridge of the child's nose at a distance of 8-12 inches. Get the child to look at the light. Pass if the light is reflected in the same place in each eye. If the child wears glasses – keep them on for this task.

# Functional Vision

## Alternate Cover Test

Detects deviation in the alignment of the eye. Have the child focus on a target object ( light, your nose, toy, a sticker or clown nose on your nose) held 8-12 inches from the child's face at eye level lined up with the child's nose. Place the cover ( your hand or a card) over one eye and observe the other for movement. Repeat with the other eye.



# Functional Vision

## Tracking

Hold the penlight or toy 6-12 inches from the child's face. The child's head should remain still. Move the light very slowly horizontally, vertically and in a circular movement. When moving horizontally be sure to move from left to right as you cross the midline – do not start at the midline. Some children under 12 months may have trouble with the circular movement due to neck muscle development.

# Dental Check

Sit directly in front of the child using a penlight as needed.

Look inside the child's mouth.

Observe for sores and abnormalities.

Count the teeth.

Inspect for swelling, bleeding, sore, spots on the teeth and other abnormalities.

Inspect for holes or teeth growing in unusual places or directions.

# Functional Hearing

Choose a quiet area with little distraction or noise.  
Have the parent hold the child or sit directly in front of them.

Have the parent use a book or quiet toy to get the child's attention.

Have noise makers available at a low, medium and high pitch.

# Functional Hearing

Hear check noisemakers.

You want a low, medium and high pitch.

Squeeze toy – medium pitch. Be sure to squeeze it

away from the child so the child does not respond to the air movement.

Bell – high soft sound

Rattle – an ordinary baby rattle is adequate

## Functional Hearing

Sit behind the child at a 45 degree angle. Stay out of the child's peripheral vision. Repeat sounds on each side. 2 repetitions should give you the information you need.

# Functional Hearing

Newborn – arousal from sleep or change of facial expression

3-4 Months – rudimentary head turn, wobble of head even slightly toward sound, change of facial expression

4-7 Months – localizes ( turns head to the side only)

7-9 Months – localizes to the side and directly below

# Functional Hearing

9-13 Months – localizes to the side and below

13- 16 Months – localizes to the side, below and directly above

16 – 21 Months – localizes all directions; side, below and above

21 – 24 Months – localizes directly to the sound at any angle

# Functional Hearing

Whisper test

Whisper the child's name. Try on both sides.



# Health Record

Interview style is recommended.

If the parent fills it out, it should be reviewed by the Parent Educator.

Immunization record should be included.

Parent must be given a written copy of the screening.

# Immunizations

We should access and document the immunization record.

If the family chooses not to immunize – document.

If the family asks you if they should immunize – refer to the health care provider.

# Documentation

Documentation of all components is required for the screening to be complete.

Resource referral form must be completed if needed.

Parent must be given a copy of the summary.

# Resources

American Academy of Pediatrics - [healthychildren.org](http://healthychildren.org)

Centers for Disease Control - [cdc.gov](http://cdc.gov)

314-454-KIDS

Infantsee.org – free vision screenings under 12 months

[frc@bjc.org](mailto:frc@bjc.org) or 314-454-2350

County Health Departments

CHAD stickers – [modot.mo.gov/ordersystem](http://modot.mo.gov/ordersystem)

Review the ECDA manual for  
clarification of requirements.

[www.dese.mo.gov](http://www.dese.mo.gov)