

VISA Recording Sheet

Name:

Date:

Date of birth: Insert identification sticker

Screeener:

Hospital Number:

History of eye care

	Yes	No
Glasses broken or lost?		

Visual symptoms

	Yes	No
Any visual symptoms? If yes specify...		
Any family concerns? If yes specify...		

Visual observation

	Yes	No
Any visual observations? If yes specify...		
Any family concerns? If yes specify...		

Visual acuity

	N/A	Yes	No
Distance visual acuity worse than 0.2: cannot see one or both lower lines Right eye = _____ Left eye = _____			
Near visual acuity worse than N6: cannot see one or both upper lines Right eye = _____ Left eye = _____			
If unable to read letters, grating acuity only large size seen			

Eye alignment

	Yes	No
Eye turns in		
Eye turns out		
Eye turns up		
Eye turns down		

Where the answer to any question is yes, refer (based on VISA referral guidelines) to your Orthoptist/Eye clinic.

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Eye movement

	Yes	No
One or both eyes do not move fully to right side		
One or both eyes do not move fully to left side		
One or both eyes do not move fully upwards		
One or both eyes do not move fully downwards		
One or both eyes do not move fully inwards		
One or both eyes appear to wobble/judder (nystagmus)		

Visual fields

	Yes	No
Part of the peripheral visual field is missing (outline on chart on next page)		
Part of the central visual field is missing		

Visual inattention

	Yes	No
Line bisection is notably off centre		
Inaccurate clock drawing completion		
Clock cancellation: number cancelled less than 42		

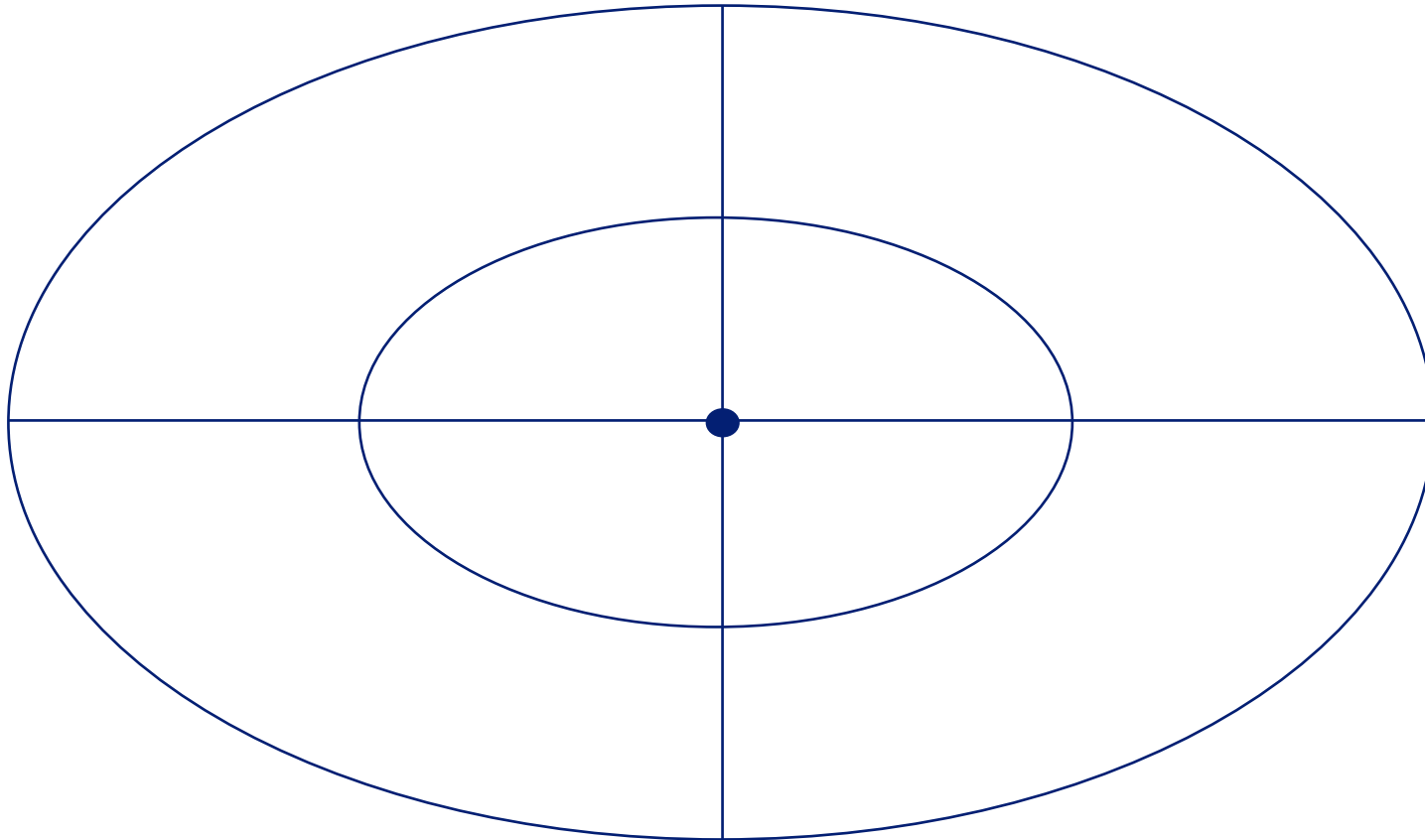
Where the answer to any question is yes, refer (based on VISA referral guidelines) to your Orthoptist/Eye clinic.

Action

Refer Retest No apparent defect

Test distance of 1 metre

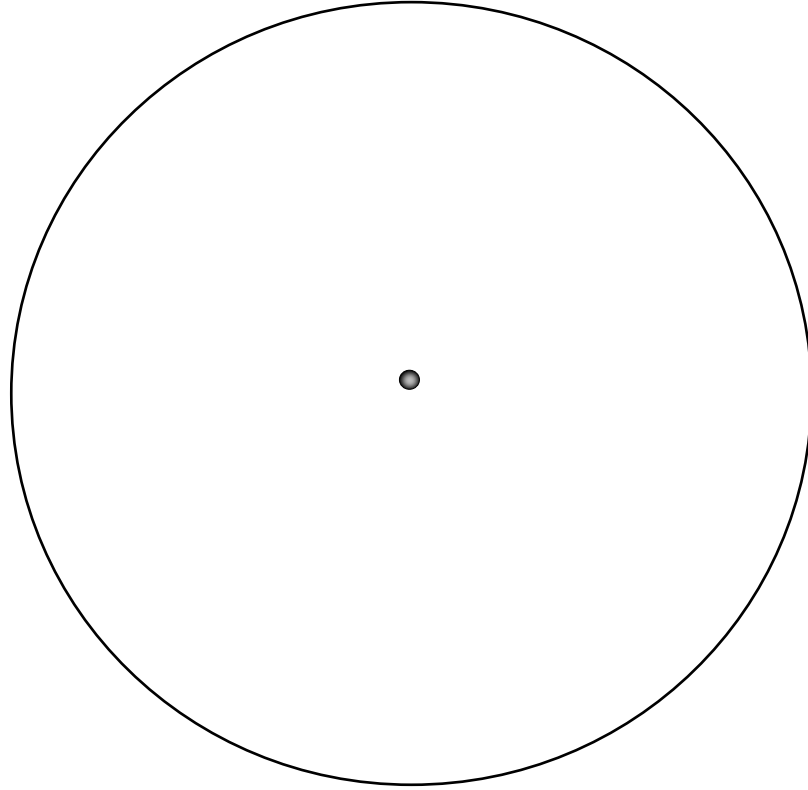
Both eyes



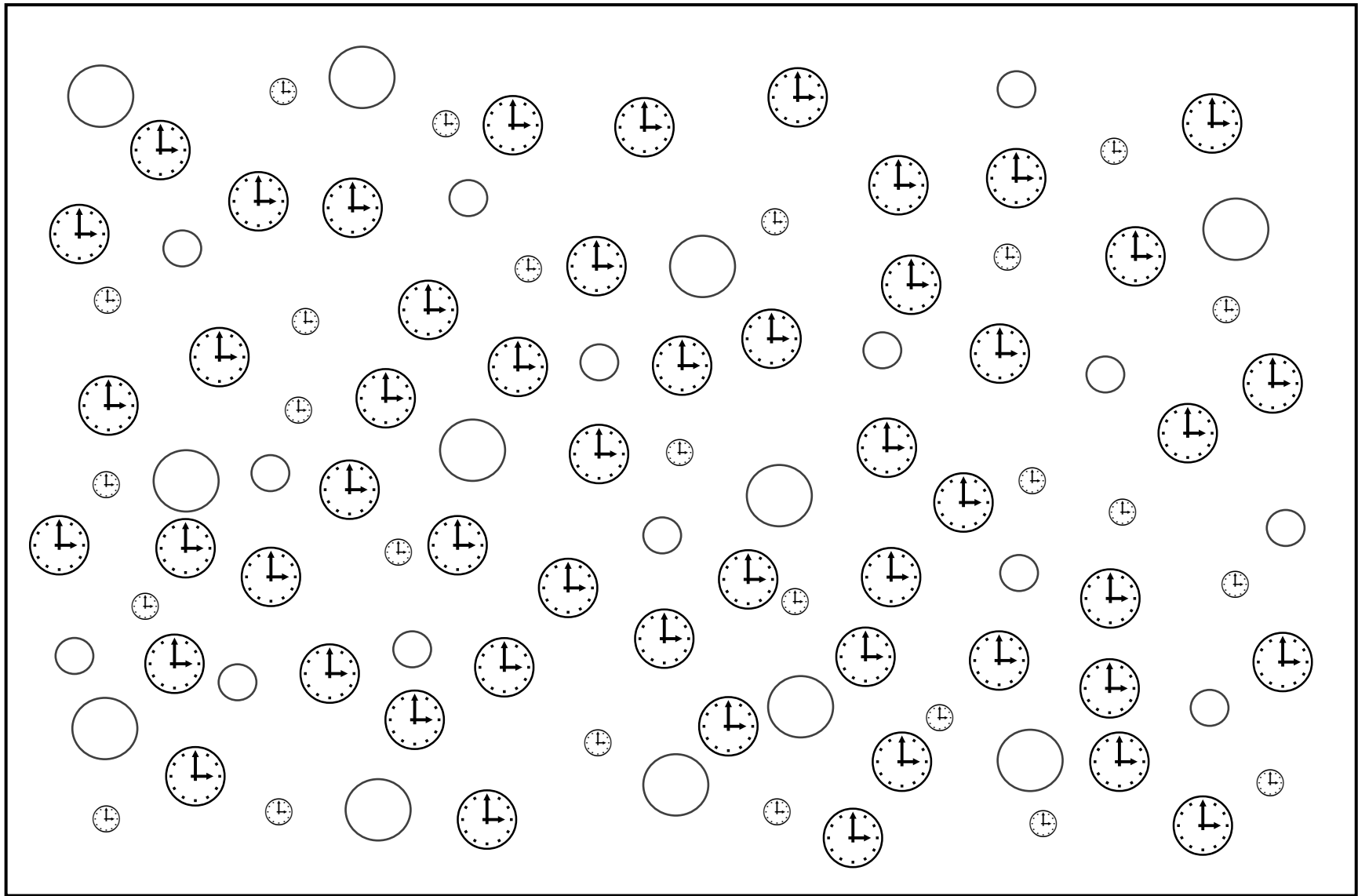
Referral to be made for formal visual field assessment where there is evidence of a visual field defect.



Referral to be made where the mark is placed more than 6mm from the centre of the line



Referral to be made to the appropriate service where the clock is incomplete and/or numbers and arrows are deviated to one side



Referral to be made to the appropriate service where less than 42 of the 50 clocks are cancelled