

Vision & Hearing Screening Guidelines

Joint Public Health Conference September 23, 2025



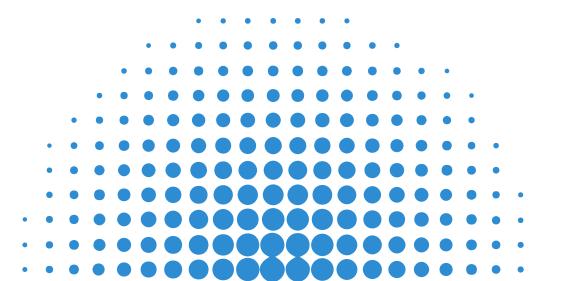
Our Team

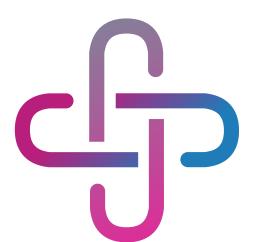


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School Nurse Supervision & Support



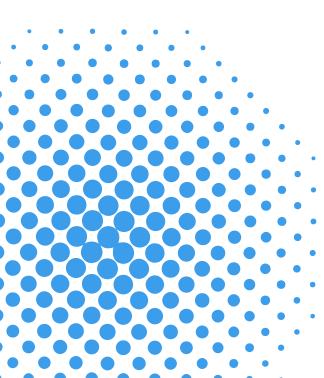


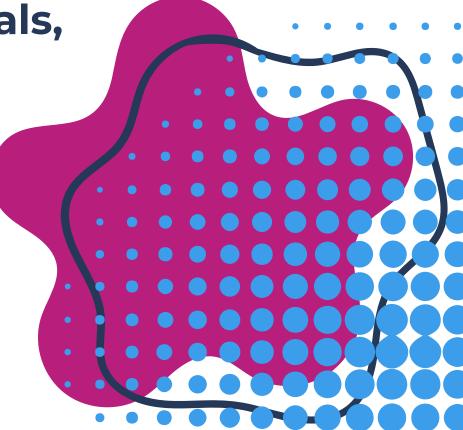




- Discuss the purpose and characteristics of vision and hearing screening programs in schools
- Identify the recommended screening schedule, procedures, and equipment

• Explain the importance of re-screening, referrals, follow-up, and tracking of screening results







Purpose of a Vision & Hearing Screening Program

- Seeing and hearing impacts students ability to learn!
- We can identify students who need a complete exam by a provider
- Early identification = improved outcomes for students





Characteristics of a Screening Program

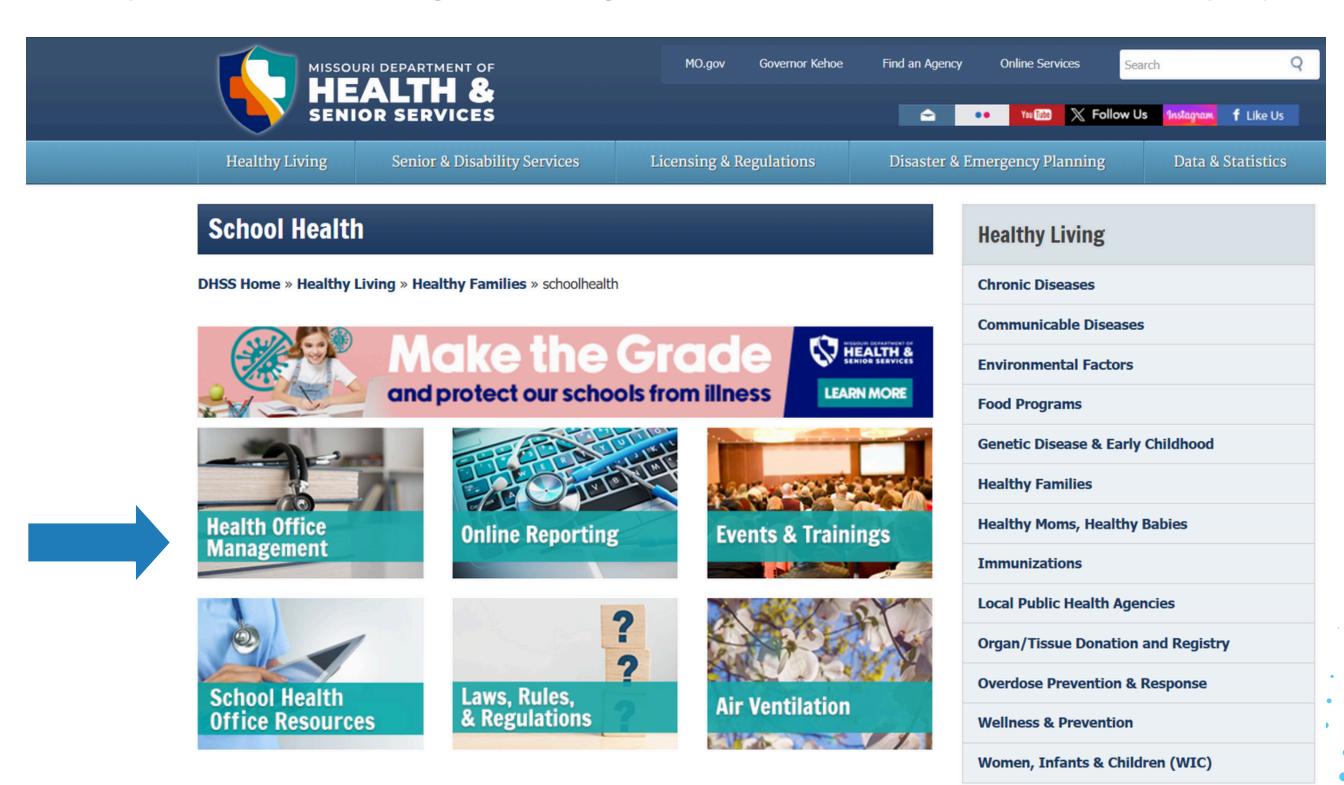
- Brief or limited evaluation of a group of individuals presumed to be normal
- Results must be communicated
- Follow-up on referrals for those "at risk" key component of screening
- Follow-up continued until problem is resolved





Screening Guidelines

https://health.mo.gov/living/families/schoolhealth/index.php



Healthy Children are Better Learners



Missouri Vision Screening Protocol

Function to be Evaluated	Specific Screening	Recommended Screening Procedure	Passing Criterion
Distance Visual Acuity	Letter Charts Symbol Charts The chart includes a 20/25 line. It is important to choose a developmentally appropriate chart	Screening Distance: 10 ft or 20 ft (chart determines distance) Conditioning: (performed binocularly) Screening Procedure: (performed monocularly)	Preschool: 20/40 Kindergarten: 20/40 Grades 1-12: 20/30 To receive credit for a line, the child must identify one more than half of the letters/symbols on that line.
Near Visual Acuity	Letter Charts Symbol Charts The chart includes a 20/25 line. It is important to choose a developmentally appropriate chart	Screening Distance: (see chart recommendations) Conditioning: (performed binocularly) Screening Procedure: (performed monocularly)	Preschool: 20/40 Kindergarten: 20/40 Grades 1-12 20/30 To receive credit for a line, the child must not identify one more than half of the letters/symbols on that line.
Stereopsis/ Binocular	Random Dot E.	Screening Distance: 40" all screening, including prescreening, should be done binocularly with the polarized glasses on. Conditioning: Screen the child's ability to perform the screening by having the child identify the location of the three-dimensional "E" correctly on four out of the five presentations. Screening procedure: Screen the child's ability to identify the location of the Stereo E. Five presentations should be used, varying the location in a random manner.	Child must locate Stereo E on four out of five presentations. Done binocularly with the polarized glasses on.



Vision Screening Demonstration Video





Vision Screening Schedule

Grade	Screen	Type of Screening
All students new to district	Recommended	Age Appropriate
K	Recommended	Near & Distance Acuity, Random Dot E
] st	Recommended	Near & Distance Acuity, Random Dot E
2 nd	Recommended	Near & Distance Acuity, Random Dot E
3rd	Recommended	Near & Distance Acuity, Random Dot E
Every other year after 3 rd grade	Recommended as time permits	Near & Distance Acuity



Vision Re-Screening Guidelines

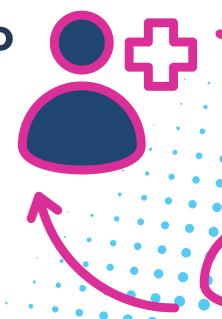
- Indicated for any student failing any part of the initial screening (distance, near or binocularity)
- Eliminates students who failed initial screening due to factors such as fatigue, illness, anxiety, misunderstanding or distractions
- Should be done within 14-21 days after initial screening
- Re-screening procedures are the same as initial screening procedure





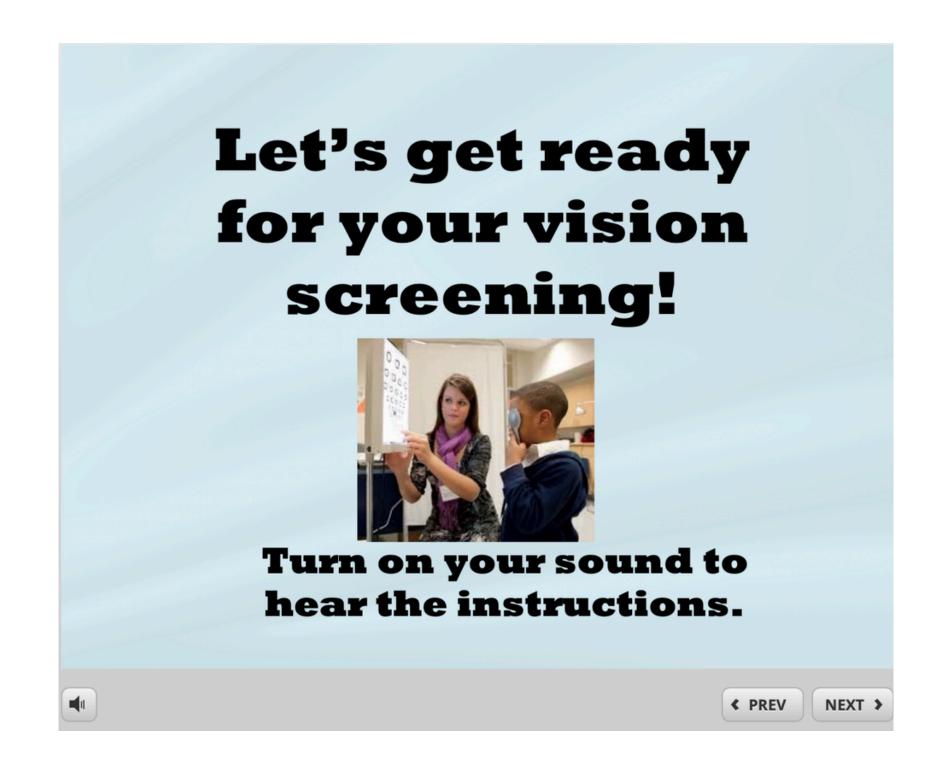
Vision Referral

- Indicated if student fails any portion of the re-screening
- Notify parent/guardian in person or by phone prior to sending written referral
- Written referral should be sent to the parent/guardian within one week after the re-screening
- Important to notify classroom teacher if referral sent so that classroom accommodations can be implemented





Preparing Students for Vision Screening Resource





Important!

- Per the Missouri School Vision Screening Guidelines –
 instrument-based screenings are appropriate for ages 1-6 years.
 (examples: SPOT, Plusoptix, photoscreeners) It may be
 beneficial to use a photoscreener to screen students with
 special needs or those who might be difficult to screen.
- If you are using an outside agency for screenings, be sure to review your board policy regarding screenings and volunteers.
 Volunteers may be required to have a background check. Using outside agencies for your screening programs may be considered conflict of interest.



Hearing Screening Guidelines



How Does Hearing Loss Sound?





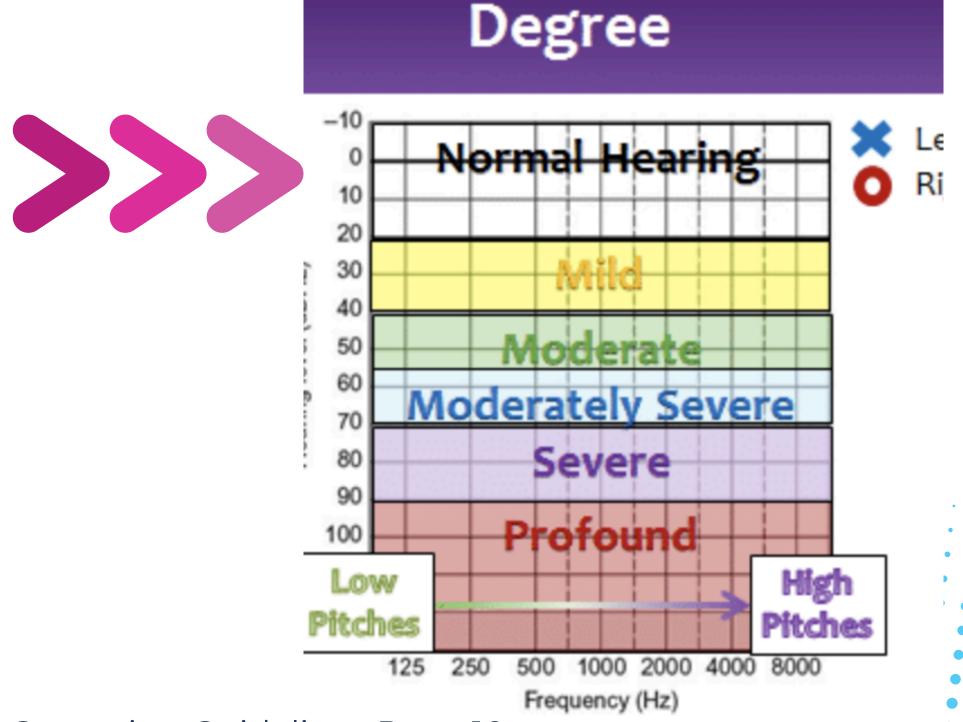
Legislation Affecting Hearing Screening





Hearing

Normal hearing
occurs between 10
and 20 decibels
(loudness of sound)



*Hearing Screening Guidelines Page 10



Hearing Screening Schedule

Screen any student referred by the teacher, parent, or self, and special education evaluation requests.

Grade	Screen	Type of Screening
Pre-K - K	Recommended	Audiometer
1st	Recommended	Audiometer
2nd	Recommended	Audiometer
3rd	Recommended	Audiometer
7th	Recommended for education purposes regarding noise exposure, if time permits.	Audiometer



When to Screen (Hearing)

- Pick a time after the first week of school
- Children entering school for the first time need time to adjust to school
- GO
- Don't wait too long, cold and flu season will hit
- Early screening allows time for follow-up

When NOT to Screen (Hearing)

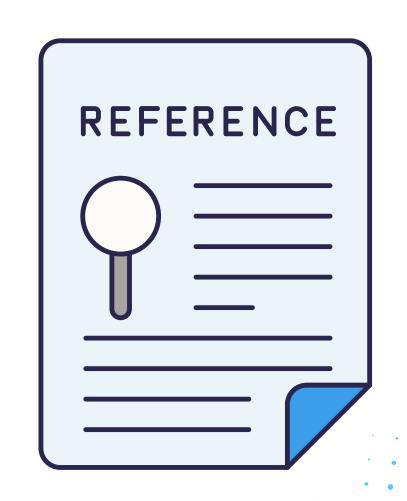


- If the student has hearing aids
- Cochlear implants
- Documented hearing loss



Hearing Screening Prep

- Share prep video with students
- Test audiometer in quiet room
- Gather supplies:
 - Disinfecting wipes
 - 2 chairs
 - 1 table for equipment
 - Audiometer

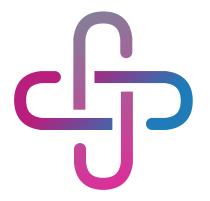




Headphone Placement

- Place headphones on student (red on right ear, blue on left ear)
- Hair behind ears
- Remove large earrings
- May want to remove glasses
- Diaphragm of headphones over ear canal
- Adjust headband for snug fit
- Headband on top of head





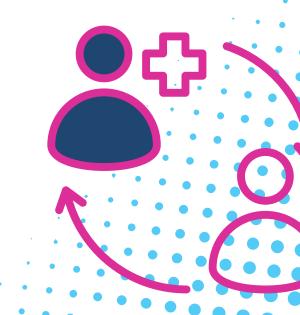
Audiometry Screening

- 1. Start screening in right ear
- 2. Pre-set 1000 Hz at 40 dB
- 3. Move dial to 20dB
- 4. Present tone 3 times noting the child's response
- 5. Change frequency to 2000 Hz and present tone
- 6. Change frequency to 4000 Hz and present tone
- 7. Switch to left ear



Hearing Referral

- If the child misses any frequency in either ear, re-screen the child in 14-21 days. If the child fails the re-screening, refer the student for further evaluation.
- Indicated if student fails any portion of the re-screening
- Notify parent/guardian in person or by phone prior to sending written referral
- Important to notify classroom teacher if referral sent so that classroom accommodations can be implemented





Vision & Hearing Follow-Up & Tracking Guidelines

- Most important component of any screening tracking system
 - Assures students referred receive appropriate treatment/services
- Follow-up with phone call if no information about the referral received after 3-4 weeks
- Continue to contact parent/guardian periodically until notified of disposition of referral
- Important for nurse to be familiar with community resources for those needing financial assistance
- Document all aspects of process in health record



References



- DHSS Vision Screening Training PowerPoint
 https://health.mo.gov/living/families/schoolhealth/pdf/VisionScreeningTraining.pdf
- DHSS Vision Screening Guidelines https://health.mo.gov/living/families/schoolhealth/pdf/GuidelinesVisionScreening.pdf
- American Association for Pediatric Ophthalmology and Strabismus http://aapos.org
- DHSS Hearing Screening Guidelines
 https://health.mo.gov/living/families/schoolhealth/pdf/HearingScreeningGuidelines.pdf
- MO School for the Deaf https://msd.dese.mo.gov/



Contact Us



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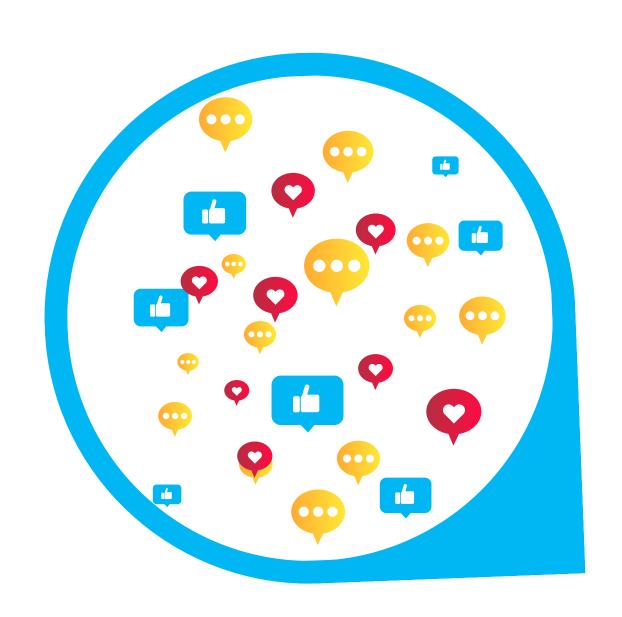


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LET'S STAY CONNECTED!





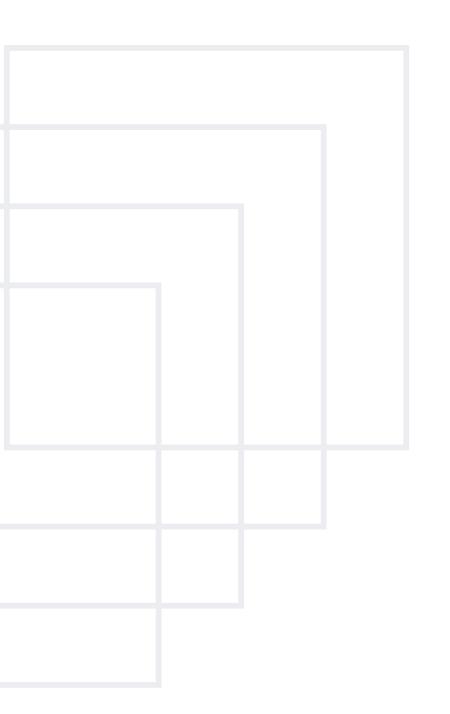














Thank You

