

**What grades do we need to test?**

Distance and near visual acuity screening must be performed on grades K or 1, 3, 5 and 8. This differs from the previous act, as the 5th grade screening has been added, and near vision testing has been included. Additionally, a "Modified Clinical Technique" battery of tests by an optometrist or ophthalmologist must be performed in either grade K or 1.

**We use a vision tester instrument for acuity screenings. Is this ok in the new revised law?**

While it is not possible to say what capabilities and attributes all vision testers may have, in general they would continue to be an effective way of conducting visual acuity screenings. Many will have settings to change the target from a distance viewing task to a near test, so near acuities could be obtained as well. If in doubt, inquire with the manufacturer or investigate on their website for information, or consult with a local eye doctor for an opinion.

**Is near and far vision required when doing visual acuity screening?**

Yes, the testing of visual acuity is to be done at both near and far distances for all grades that are required to be screened (K or 1, 3, 5 and 8). The law defines vision screening as the testing of visual acuity to determine an individual's ability to see at various distances, of either ten (10) to twenty (20) feet for distance vision, and a distance of fourteen (14) inches for near vision.

**What are the procedures for doing near vision screening?**

Near vision can be screened using a 14 or 16 inch card. A visual acuity of 20/30 on a 16 inch testing card will be roughly equivalent to the 20/32 acuity on a 14 inch card, so that is still a passing performance.

**Where can I get near cards?** While we are not advocating or promoting any manufacturers in particular, a search on the Amazon.com website reveals a number of inexpensive near cards are available. They included the: - McCoy-Ultimate Rosenbaum/Snellen Pocket Eye Chart - Prestige Medical Pocket Eye Chart - GrafcO Pocket Size Plastic Eye Chart

**Does the child pass if they are able to read a line at 20/30?**

An acuity of 20/30 or 20/32, depending on the test instrument, is considered a passing acuity. If they cannot read 20/30, so they are worse than 20/30, the student needs to be recommended for referral. The school must provide a written recommendation for further examination to the parent or legal guardian of the student.

**How many symbols on the 20/30 or 20/32 line must the child read correctly in order to pass the screening?**

A student must correctly identify more than half of the letters or symbols on a given acuity line to be considered to have "passed" that level of acuity.

**What should I do if I cannot find an eye professional to do the MCT screening?**

If an eye care professional cannot be found, the school must contact the Indiana Department of Education for a waiver. If a waiver is provided, the law still requires kindergarten/1st grade students to undergo a vision screening. That screening may be done in the same manner, and with the same resources, as the screenings conducted on 3rd, 5th and 8th grade students.

**How do schools apply for a waiver?**

If a school is unable to comply with completing the MCT vision screening requirement, the school may request a waiver from the IDOE by submitting a MCT Waiver Form by November 1 of a school year. The

waiver form can be found at the following link: <http://form.jotformpro.com/form/31473566619967>. Schools should no longer complete a waiver at the building level. Public and charter schools should submit one request per school corporation.

**Can schools require parents to complete the MCT screening at their own expense and by their own provider and send the results to the school?**

The statute refers to schools obtaining the services of an eye professional and providing this screening to students. Schools can ask or recommend that an MCT exam be provided by the parent, but a school cannot require this exam be completed in order for a student to enroll or attend school. If a school does require the MCT screening and a parent is not able to afford this screening, the school must pay for this service for this child.

**If an eye exam is done outside the school, can that count for the MCT?**

A record of a complete eye examination, which includes proof that the 4 components of the MCT were completed and passed, would meet the requirements of the law. Any such examination must have been performed within the past 12 months. A visual screening done by reading an eye chart in a pediatrician's office does not meet the criteria to replace or be equivalent to the MCT testing.

**If eye professionals come to the school to perform the MCT, what things do they need, how long might it take, etc.?**

Generally, the eye professionals and possibly some of their staff will bring everything they need to conduct the testing. Usually, visual acuity screenings can be done in advance by the school nurse or his/her designee, and a recording sheet or card prepared for each student with that visual acuity listed. There will need to be at least a semi-dark room to be able to conduct the refractive testing (generally a test called retinoscopy), and it is often useful if there is a movie playing at the far end of the room to give the student something to look at and hold their attention during this test. The screening of each student takes only a minute or two for the MCT test, if visual acuities have been tested in advance by the school nurse or his/her designee.

The recording sheet should have places to record the findings for visual acuities at distance and near, and then Pass/Fail listings to circle, or boxes to check for the refractive, eye health, and eye binocular coordination. An open area as a "Comments" section is helpful, and then a Final Results area to indicate Pass, Fail, or Borderline for the test results as a whole. A sample recording sheet can be found as Appendix A.

The borderline designation is sometimes helpful when the student just passes the criteria, but the eye professional thinks the student might have problems prior to 3rd grade, and be flagged for special testing in 2nd grade, or tested later in the 1st grade. If the student is listed as borderline, the student does not need to be referred to an eye professional for further testing. The parent should be notified of the borderline result and the school nurse should rescreen the student at the beginning of 2nd grade or sooner if requested by the parent or the teacher. This may also be the case if the student was not cooperative and testing may not have been complete or reliable.

**If the eye exam is done outside the school venue, can a pediatrician do it?**

With regard to kindergarten and first grade students, the law specifically requires that a MCT screening be done by an Optometrist or an Ophthalmologist. This is because this type of screening is more comprehensive and requires the skills and expertise of professionals with specific training in that area.

**How long would an exam outside the school setting be good for – for example, if the exam is done at the age of 4 would that count?**

While the law is not specific on this point, the intent of the law is to insure that a child's sight is healthy enough for learning. Thus, best practices would suggest that the exam be no more than 12 months prior to school entry into grade K or 1.

**Can eye professionals charge the school for this service?**

Nothing in the law prohibits an eye care professional from charging for a service. However, the intent of the law is not to add an additional financial burden to the school.

**How would billing be done if the student had Medicaid?**

Medicaid will not cover school vision examinations conducted in schools. However, Medicaid will cover comprehensive eye examinations of children enrolled in that program. The service must be done by a provider who accepts Medicaid and the provider will bill Medicaid directly. However, Medicaid will not cover school vision examinations conducted in schools.

**What type of school does this law apply to?**

This law applies to all public schools, all charter schools, and all accredited private schools

**Where can I find a copy of the law to view?**

To view the complete law, please click on the following [link](#) or search the Indiana General Assembly website at [iga.in.gov](http://iga.in.gov) for code #20-34-3-12.

[Click here](#) to read the Indiana Department of Education Vision Screening Guidelines as published in the Indiana School Nurse Manual

[Click here](#) to see a Sample MCT Recording Sheet

[Click here](#) to see more information for Doctors and School Nurses

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