

Your screening kit: a binocular vision check in about 3 minutes

Use it when a patient with healthy eyes and the right prescription still reports reading trouble, headaches or eye strain.

Fixation stick

Letter ladder (top), picture ladder (bottom), red and blue X at the tips. Back: cm ruler from each end with diopters.

Cover paddle

For the cover test at distance and near.

±2.00 flipper

For accommodative facility at 40 cm.

	Test and how	Refer when
1	Symptoms (CISS). Ages 9 and up: the patient fills in side 1 of the screening form (read it aloud to a child). Add the score.	CISS 16+ (children) or 21+ (adults)
2	Cover test, distance and near (cover paddle). At near, the patient reads one line above their best on the letter ladder. Note exo or eso.	Near exo at least 4Δ more than distance; eso greater at near; any vertical deviation; any tropia
3	Near point of convergence. Move the X toward the nose until it doubles. Keep the tip there, turn the stick to the nose and read the cm. Repeat 3–5 times if symptoms suggest fatigue.	Break at 6 cm or farther, or it recedes with repeats
4	Amplitude. Push the 20/30 line in until it first blurs; the ruler gives cm and diopters. Each eye, then both.	Below 15 – $0.25 \times \text{age}$, or 2 D between eyes
5	Accommodative facility (±2.00 flipper, 20/30 line at 40 cm). Both eyes for 1 minute; count cycles. Test each eye only if both-eyes fails. Note if minus or plus is the slow side.	Ages 8–12: under 5 cpm both eyes or 7 each eye. Ages 13+: under 8 or 11. Under age 8: record only.
6	EOMs. Pursuits: follow an X. Saccades: hold the stick sideways, “red X, blue X.”	Jerky pursuits, overshoots or head movement

One positive finding plus symptoms is enough to refer

Check the concern on your referral pad, write the findings, and tick “Please call my patient.” You get a written report within 7 days.

Same-day medical care, not a referral to us: sudden new double vision, a new eye turn, a new vertical deviation with headache or neurological signs, or eye pain.



What to tell your patient: about 20 seconds

Patients follow through when the doctor sounds sure. Say it in your own words, but keep the three parts: healthy eyes, a problem that can be treated, and what happens next.

TO A PARENT

“Your child’s eyes are healthy, but their visual skills aren’t keeping up, and that can make reading, learning and sports harder than they should be. I’m sending you to a colleague who specializes in this. They’ll call or text you today to book.”

TO AN ADULT

“Your eyes are healthy, but your visual system isn’t keeping up, and that’s likely behind the symptoms you’re noticing. I’m referring you to a colleague who treats exactly this. Expect a call or text from them today.”

What happens after you refer

- 1 Same day:** we confirm to your office that we received the referral, and call or text the patient or family to book. If you checked “Please call my patient,” we make sure it’s a call.
- 2 At 2 weeks:** we let your office know whether they booked. If they haven’t, we try once more first.
- 3 Within 7 days of the evaluation:** you get a written report.
- 4 If therapy starts:** we let you know, with a personal note from Dr. Murray.

When your patient asks

“Is it covered?”

Vision therapy is usually private pay. Many patients use HSA or FSA funds, and Florida FES-UA scholarships are accepted. Their team explains costs and payment options at the evaluation.

“How long does it take?”

It starts with one evaluation. If therapy is recommended, it’s usually weekly office visits plus short home practice, and they’ll give you a timeline at the first visit.

“What do I do next?”

Watch for a call or text from Vision & Learning Center today, or call (561) 462-1245 to book.

Refer: fax the screening form to (561) 462-1245, email it to hello@visionlearncenter.com, or refer online at visionlearncenter.com

Dr. Murray is glad to talk through any patient.

