

# VISION SCREENING & ASSESSMENT WORKSHOP

## Garden City, KS

*Sponsored by*

The University of Kansas Medical Center Area Health Education Center Southwest  
302 Fleming, Ste. 4, Garden City, KS 67846  
Phone (620) 275-0259 • Fax (620) 275-2831

**DATE:** Saturday, November 19, 2011

**LOCATION:** Pauline Joyce Fine Arts Building, Room 1204  
Garden City Community College, 801 Campus Drive  
Garden City, KS

**TIME:** Registration: 7:30 a.m. – 8:00 a.m.  
Workshop: 8:00 a.m. – 12:00 p.m.

**INSTRUCTOR:** Valerie Rainman, RN

**COST:** \$50.00 (*includes handout material and refreshments*)

**CLASS SIZE:** Limited to the first 25 registrants. Payment or PO must accompany registration form to be considered registered for the workshop.

***THE AHEC MUST RECEIVE YOUR REGISTRATION AND PAYMENT  
NO LATER THAN NOVEMBER 10, 2011!***

**PROGRAM DESCRIPTION:** This program is designed to provide vision screening theory and practices for nurses and other service providers in public health, schools and community work sites. Participants will be able to utilize the information and skills to perform standardized vision screening techniques for children and youth. Vision Screening Guidelines for Infants, Toddlers, Children and Youth, June 2004, Fifth edition, Kansas Department of Health & Environment, Bureau for Children, Youth and Families will be utilized in the workshop.

**PLEASE NOTE:** Participants can review a copy of the Vision Screening Guidelines for Infant, Toddlers, Children and Youth, June 2004, Fifth edition from the following Web site:

***<http://www.kdhe.state.ks.us/bcyf/download/VisionGuidelines2004.pdf>***

**Copies will be available at the course.**

## **OBJECTIVES:**

At the conclusion of the program, participants will be able to:

1. Describe vision screening requirements for children and youth.
2. Demonstrate competencies in conducting age appropriate tests for vision screening from infant-toddler to school age and special education populations.
3. List common childhood vision defects and identify appropriate test(s) to detect those defects.
4. Demonstrate use of the referral criteria for each selected test.
5. Describe the importance of appropriate follow-up on all referrals.

## **AGENDA:**

7:30 – 8:00 a.m.      Registration  
Introduction to vision screening, Kansas laws and KDHE recommendations  
Anatomy and physiology of the eye, common eye diseases, concepts of light refraction, eye health and risk factors  
Vision screening for infant-toddlers  
Color vision, Worth 4 Dot, Stereopsis  
Acuity Testing—Near, distance and excessive hyperopia  
Demonstrations for near and distance visual acuity, written examination and questions/answers  
*(20 minutes of break time will be given at the discretion of the speaker.)*

Participants will be given demonstrations of each screening test and will have time to practice with peers and perform a return demonstration of skills. Equipment and supplies for the practice sessions will be available at the program.

## **NURSING CREDIT:**

The University of Kansas Medical Center Area Health Education Center East, as an approved provider of continuing education by the Kansas State Board of Nursing, presents this offering for a maximum of 4.0 contact hours credit applicable for relicensure of RNs, LPNs and LMHTs. Kansas Provider Number LT0056-0749. Continuing nursing education credit will be prorated according to documented attendance.

## **CANCELLATION POLICY:**

A registrant may cancel no later than one week prior to the workshop to receive a refund minus a \$15 administrative fee. After that no refunds will be made. The registration fee will not be transferred to future offerings. Refunds are made by mail. KU Medical Center AHEC reserves the right to cancel this program and return all fees in the event of insufficient registrations. KUMC AHEC will not be responsible for any losses incurred by registrants, including but not limited to airline cancellation charges or hotel deposits.