

## Visual Difficulties Screening Protocol V.2. 2019: adults

Questions on eye and vision history	Comments and notes	
1. Have you any history of visual difficulties / problems with sight / visual impairment?		
2. When did you last have a sight-test by an optometrist (“optician”)?		
3. Was any prescription made? <b>YES / NO</b>  If <b>YES</b> , were you advised to wear the prescription glasses/contact lenses for <b>distance</b> (e.g. for watching television or for driving) or <b>near</b> (e.g. for reading) or <b>both</b> ?  If <b>YES</b> , do you wear the prescribed glasses / contact lenses? <b>YES / NO</b> If <b>NO</b> , why not?		
4. If <b>YES</b> , do you have the prescribed glasses/contact lenses with you today? <b>YES / NO</b>	Prescribed glasses/contact lenses should be worn for a SpLD assessment, unless intended for distance use only.	
5. Have you ever used coloured overlays / colour-tinted glasses? <b>YES / NO</b> If <b>YES</b> , Who advised and provided them?  Why were they recommended?  Did they help? If <b>YES</b> , in what way?  Do you still use them? If not, why not?		
Questions on reading / near work activity		
6. Approximately how many hours per <b>working/study</b> day do you spend at a screen (phone, tablet, computer) etc?		
7. Approximately <b>how many additional hours per working /study</b> day do you spend reading books, newspapers, comics or other paper-based texts?		
8. Has your screen /reading /near work time increased recently? If so, by how much?		

	<b>Visual Difficulties Questionnaire (post - 16 years)*</b>	<b>Never</b>	<b>Rarely</b>	<b>Sometimes</b>	<b>Often</b>	<b>Always</b>
1	Do you get headaches when you read?					
2	Does reading make your eyes feel sore, gritty or watery?					
3	Does reading make you feel tired or sleepy?					
4	Do you become restless or fidgety or distracted when reading?					
5	Do you become less comfortable the longer you read?					
6	When do you prefer dim light to brighter light for reading?					
7	Does reading from white paper seem too bright or glaring?					
8	Do parts of the white page between the words form patterns when you read?					
9	Does the print or background shimmer or appear coloured as you read?					
10	Does print appear to jitter or move on the page as you read?					
11	Do you screw your eyes up when reading?					
12	Do you rub your eyes to relieve the strain when you are reading?					
13	Do you move your eyes around or blink to keep text clear when you are reading?					
14	Do you use a marker or your finger to stop you losing the place when you read?					
15	Do you cover or close one eye when reading?					
16	Do you lose your place when reading?					
17	Do you re-read or skip words or lines when reading?					
18	Does text appear blurred, or go in and out of focus, when you read?					
19	Do objects in the distance appear more blurred after you have been reading?					
20	Do the words, page or book appear double when you are reading?					
<p><b>*N.B. Response categories for this protocol: Always</b> = every day. <b>Often</b> = several times a week but not necessarily every day. <b>Sometimes</b> = 2-3 times a month. <b>Rarely</b> = only once every few months / a year.</p>						