

Magnification

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|-----------------------------------|--|
| 1. Use a magnifier | There are several to choose from including stand, hand-held and electronic |
| 2. Increase the size of the print | You can use a bigger font or increase the size of the copier |
| 3. Get closer to something | This is called relative magnification |

Magnifiers

- | | | |
|---|--|---|
| 1. Hand-held magnifier (with or without lighting attached) | Advantages: easy to carry on your person, simple to use, relatively inexpensive | Disadvantages: small area of view, precise distance to maintain, difficult to perform two-handed activities |
| 2. Stand magnifiers that are placed on a surface and don't need to be held by the client. | Advantages: easy to use for someone with arthritis or tremors, the focal distance is already held, and the lighting is very good | Disadvantages: bulky, can not write under most stand magnifiers. |
| 3. Electronic magnifiers cover a wide variety of magnifiers from CCTVs to portable magnifiers (e.g. smartphone); best for those with poor vision and/or read continuous text | Advantage: the amount of enlargement provided, easy to write under, fairly simple to use. | Disadvantages: Price, size of the device, need to scan page when enlarged |
| 4. Frame Mounted Magnifiers (These include half-eye spectacles, TV glasses, sporting spectacles, and loupes.) | Advantages: hands-free use, relatively lightweight, adjustable, (TV glasses or sporting spectacles) | Disadvantages: half-eye spectacle requires close viewing distance |

Magnifiers are marked with two strengths

X power how many times bigger than normal it makes things look

Diopters the power of a lens equal to 100 divided by its focal length measured in centimeter

Components of Low Vision Evaluation

1. Interview (e.g COPM)
2. Home Assessment
3. Vision-related client questionnaires (e.g. symptom management)
4. Impairment-based assessments (e.g. BIVABA, MN Read, Lea Number, etc)
5. Performance-based assessment (e.g. ADL and IADL)
6. Skilled observations

The Pepper Test (Visual Skills for Reading)

This test was designed to be used with patients who have **macular loss**

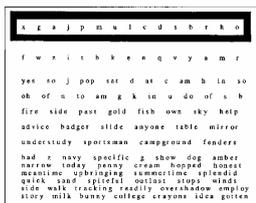
It has both letters and words

A much wider test format so it shows scanning patterns

as you progress with the test, the words get longer and closer together

The test starts at 4M and goes to 1M

The Pepper Test image



The Pepper Test (Visual Skills for Reading)

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The Pepper Test (Visual Skills for Reading) (cont)

as you progress with the test, the words get longer and closer together

The test starts at 4M and goes to 1M

Using Alternate Senses

When one sense starts failing, it is good to start using other senses

Touch and hearing are the senses most substituted for sight

Placing bump dots on appliances, locks, and plugs

Listening to get cues is a great substitution for vision

Smell is very useful to identify products

Contrast

contrast sensitivity is the ability to distinguish of light and dark

reduced contrast sensitivity is part of aging

increasing contrast can greatly improve what a client can see

simply placing a dark placemat under a white plate can make the plate more visible

Simple Contrast Modifications

Adding contrast makes a difference in how someone sees

Marking step edges with bright color tape can help clients feel safer

Adding contrasting tape to grab bars improves visibility

Simply changing the color of the plate used can allow someone to see the edge of their plate

Adding contrast to doorways and light switches makes them easier to see (dark--colored trim against a white wall

Basic Principles of Organization

1. Uncluttered background is the best
2. Fewer patterns are best
3. Try not to move things
4. Keep pathways clear

MN Read Chart

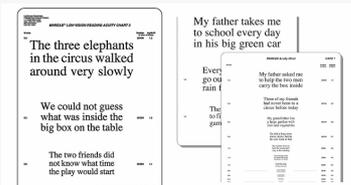
This is a standardized test that measures **acuity and reading speed**

The test consists of a series of sentences in varying sizes from 8M to 0.13M

Timed test with odd sentences to ensure the client isn't guessing

Test comes with a scoring graph that will help you determine the client's reading acuity and critical print size. This is the smallest size print a client can read at maximum speed

MN Read Chart image



Assessing Contrast and Glare Sensitivity

The ability to detect objects as they decrease in contrast from their backgrounds

ETDRS is used for **distance contrast**

Lea Numbers low contrast flip chart can be used for **near contrast sensitivity**

Mars letter contrast sensitivity (the letters start out very dark and get lighter as the test progresses)

Glare sensitivity can be tested generally by observation and questioning (if you go into some's home and all of the blinds are drawn you can pretty safely assume they are sensitive to glare)

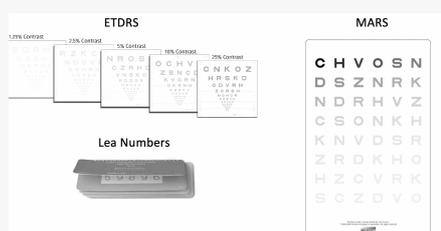


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Page 2 of 4.

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ETDRS, MARS, and LEA NUMBERS image



Light 101

As we age our eyes require more light
 9presbyopia

Consider the types of bulbs and different hues of light (increasing the wattage of bulbs to the maximum allowed for the fixture will improve safety)

Make sure light doesn't cause glare.
 (halogen is a very good light with less glare)

Two types of lighting: **task light** is a specific kind of light for an individual area or task;
general lighting lights the whole area

Home Modification Ideas

Organize! Grouping like items together not only makes them easier to find but it also takes less energy to move around the room and obtain.

Label and marking Some of the things used for marking are rubber bands, bump dots, large print labels, safety pins, puff paint, etc. The goal is that there is some sort of tactile feedback with high contrast if needed. Avoid over marking – just mark what is necessary and most used!

Teaching sighted guides to help get around the house

Educate and empower the patient and family to make modifications around their homes

SK Read

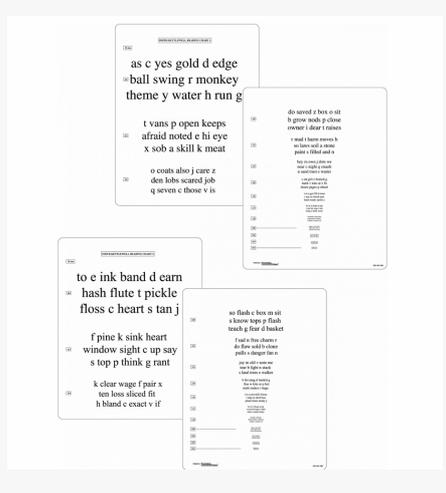
Tests reading performance of English-speaking clients with central or paracentral scotomas (blind spot)

Consists of group of words and letters that have no meaning

You can determine the location of the scotoma by mistakes they make (If they miss the beginning words you can guess that their scotoma is in the left side of their visual field)

This is a timed test and your record number of mistakes and time per section read

SK Read images



Principle of Low Vision Modifications

Primarily modifying the environment and occupations

Evaluate clients' performance and clients' perception of their performance before you can successfully modify their environment

For each vision impairment there are different parts of the vision that are affected

Treatment Basics for Low Vision

The main things that can be changed are **lighting, contrast, and magnification**

Task Lighting Strategies

Task lighting is important for near tasks such as reading and needlepoint (a gooseneck lamp with a solid shade is best)

The light should be the opposite of writing hand

light should be behind if possible

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Page 4 of 4.

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