I Spy With My Little Eye: Taking the Guess Work Out of Children’s Vision (1 hr)

Mile Brujic, OD, FAAO
1409 Kensington Blvd
Bowling Green, OH
43402
brujic@prodigy.net

Course Summary

There's only one way to find out if a child's eyes are developing properly and that’s to get them examined. This course will educate the attendee about common children’s vision issues. An emphasis will be placed on the optometry office’s role in the diagnosis and treatment of strabismus and amblyopia.

Learning Objectives/Outcomes:

1) Attendee will understand the similarities and differences between a child’s and adult eye exam
2) The diagnosis, management and treatment of strabismus and amblyopia will be understood
3) Case presentations will be used to illustrate the topics discussed

Outline:

1) (0-8min) When should children first have their eyes examined?
   a. Understanding the infant eye exam
      i. Vision – how it’s tested
      ii. Extraocular muscle function
      iii. Pupillary light reflex
      iv. Retinoscopy – Dry and wet
      v. Dilated retinal examination
2) (9-15min) Identify the similarities and differences between exams and screenings
   a. Screening – A series of tests that can help identify normal vs. abnormal findings
      i. Understanding false positives and false negatives
      ii. Understanding specificity vs. sensitivity
   b. Examination – A comprehensive assessment of the visual system
3) (16-20min) Understanding refractive errors and their roles in children’s vision
   a. Description of common refractive errors
   b. Myopia – when to prescribe
   c. Hyperopia – when to prescribe
   d. Astigmatism – when to prescribe
4) (21-28min) Amblyopia
   a. Decreased best corrected visual acuity in the affected eye
b. Risk factors
   i. High refractive error OU
   ii. Asymmetric refractive error
   iii. Strabismus
   iv. Congenital cataracts
   v. ptosis

c. Treatment options
   i. Visual correction
   ii. Patching
   iii. Atropine
   iv. Surgery

5) (29-38min) Strabismus
   a. A muscle imbalance causing the eye to turn
   b. Risk Factors:
      i. High refractive
      ii. Assymetric refactive error
      iii. Amblyopia
      iv. Cataracts
      v. Ptosis
   c. Treatment options
      i. Visual correction
      ii. Patching
      iii. Atropine
      iv. Surgery

6) (39-42min) Amblyopia and Strabismus are related
   a. The two are often seen together
   b. One is a risk factor for the other
   c. Understand how these two conditions are dependent on the other

7) (43-45min) Understanding common misconceptions and how to help parents and primary care physicians understand children’s vision
   a. “my child never told me that they could see”
   b. “the number one risk factor for amblyopia are certain types of uncorrected refractive error”
   c. Only an eye care practitioner can identify these risk factors

8) (46-50min) Interesting case presentations demonstrating the concepts discussed