

Chapter 45: RULE FOR VISION AND HEARING SCREENING IN MAINE SCHOOLS

SUMMARY: This rule provides directions to public and private schools approved pursuant to 20-A MRSA Chapter 2902 in health screening of students. It is to assist school administrative units in implementing the provision of the health screening statute [20-MRSA §6451] that requires periodic health screening to identify students that may have a sight or hearing defect.

1. Definitions

Binocular vision: Binocular vision, also referred to as muscle balance, means the ability of the eyes to function together. Screening for muscle balance is intended to identify students with a binocular disorder.

Distance Vision: Distance vision means the ability to adequately see objects at a distance. Screening for distance vision is intended to identify students with myopia, a refractive error in which light rays converge before they reach the retina.

Eye Specialist: An eye specialist is a health care provider specializing in diagnosing and treating vision problems and/or diseases of the eye. Eye specialists include optometrists and ophthalmologists.

Health Care Provider: A health care provider is a medical/health practitioner who has a current license in the State of Maine with a scope of practice that includes assessment, diagnosis and treatment of health disorders. Health care providers include physicians, physician's assistants and advance nurse practitioners.

Near Vision: Near vision means the ability to adequately see objects near, such as when reading. Screening for near vision is intended to identify students with hyperopia, a refractive error in which light rays have not converged before reaching the retina.

Optotypes: An optotype is a focal image or target on a screening tool used to determine visual acuity.

Parent: Parent means a natural or adoptive parent, a guardian, or a person acting as a parent of a child with legal responsibility for the child's welfare.

Puretone Audiometer: A puretone audiometer is a machine designed to screen for hearing loss. A variety of frequencies (Hz) audible to the human ear are played in each ear at a defined decibel (dB).

Referral: Referral means the submission of a written form from school directing the parent to bring their child to a health professional for an evaluation of the potential health problem.

School Nurse: School nurse means a registered professional nurse with Maine Department of Education certification for school nursing.

Screening: Screening means a process of identifying students with a possible health problem in order to facilitate early intervention or treatment.

2. School Nurse Responsibility

- A. The school nurse will provide direction and oversight for the vision and hearing screening program in the school.

3. Vision Screening

- A. Any public or private school approved pursuant to 20-A MRSA §2902 shall screen students for vision as follows:
- i. Distance vision acuity will be screened in kindergarten and grades, 1, 3, 5, 7, and 9.
 - a. The screening tools recommended for kindergarten students unable to read distance acuity chart are:
 - i. HOTV chart
 - ii. Tumbling E chart
 - iii. Lea Symbols chart
 - b. Kindergarten students must read the majority of optotypes at line 20/40 to pass. Student will be considered to fail the screening if they are unable to read the majority of optotypes at line 20/40 or if they have a two line difference between the right and left eyes. If using screening tools other than those above, the equipment manufacturer's specifications will determine screening failure.
 - c. Screening tools recommended for students in grades 1 and above are:
 - i. Sloan letter chart (illuminated preferred)
 - ii. Snellen letter chart
 - iii. HOTV or tumbling E if unable to test with Sloan or Snellen
 - d. Students in grades 1 and above must read the majority of optotypes at line 20/30 to pass. Students will be considered to fail the screening if they are unable to read the majority of optotypes at line 20/30 or if they have a two line difference between the left and right eyes. If using screening tools other than those above, the equipment manufacturer's specifications will determine screening failure.

- ii. Near vision will be screened in grade 1 and 3. It is recommended that kindergarten students and students in grade 5 also be screened.
 - a. Screening tools recommended are:
 - i. Near vision acuity card
 - b. The same criteria used for distance vision, will be used to determine screening failure for near vision acuity cards.
- iii. Binocular vision will be screened in grade 1 and 3. It is recommended that kindergarten students also be screened.
 - a. Screening tools recommended are:
 - i. Random dot E
 - ii. Maddox Rod muscle balance card
 - b. Students considered to fail the screening will be determined by equipment manufacturer's specifications.
- iv. For those students with glasses, screening should occur with student wearing glasses.
- v. Students who fail the vision screening will be referred to their parents and provided with a referral form to bring to their health care provider or eye specialist.

4. Hearing Screening

- A. Any public or private school approved pursuant to 20-A MRSA §2902 shall screen students for hearing as follows:
 - i. Hearing screening will be conducted in kindergarten and grades 1, 3, and 5. It is recommended that students in grade 7 also be screened.
 - ii. A puretone audiometer will be used to screen hearing.
 - a. Students will be screened in both ears at 25dB with a sweep check at 1000 Hz, 2000 Hz, and 4000 Hz. It is recommended that students also be screened at 6000 or 8000 Hz.

- b. It is recommended that a hearing rescreen occur in 2 – 4 weeks for students who fail.
- c. A student will be considered to fail when the student is unable to hear all frequencies in both ears.
- d. Students who fail the hearing screening at 1000 Hz, 2000 HZ, or 4000 Hz will be referred to their parents and provided with a referral form to bring to their health care provider.
- e. Students who fail the hearing screening at 6000 or 8000 Hz will be referred to their parents and provided information on how to avoid further high frequency hearing loss. Parents will be encouraged to inform the student's health care provider of the high frequency hearing loss.

5. Other

- A. A student whose parent objects in writing to screening on religious grounds shall not be screened unless a sight or hearing defect is reasonably apparent.
- B. It is recommended that vision and hearing screening occur early in the school year.
- C. Vision and hearing screening of students outside the grade level required for screening should occur upon referral from teachers or with presentation of signs or symptoms of a problem.
- D. Students transferring to the school without record of previous screening should be screened.
- E. When a trained, unlicensed individual conducts the initial screening, rescreening of failures must be conducted by the school nurse before a referral is made.
- F. The school nurse shall follow-up with the parents of students referred to their health provider to determine the disposition of the referral.
- G. An annual report will be made to the Maine Department of Education on the results of vision and hearing screening to include the number of students screened by type of health screening, the number of student referred, and the number of referrals returned by disposition.

STATUTORY AUTHORITY: 20-A M.R.S.A. §6451

EFFECTIVE DATE:

April 1, 2006 – filing 2006-136

