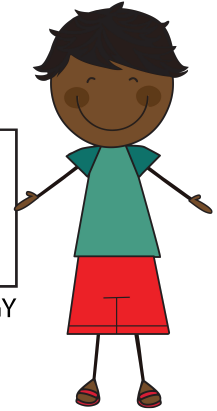


**Iowa KidSight**

A PARTNERSHIP OF LIONS CLUBS OF IOWA & UNIVERSITY OF IOWA OPHTHALMOLOGY



# Training & Review Manual

On-line training/review modules are also available at:  
<http://iowakidsight.teachable.com/>

## MISSION STATEMENT

**IOWA KIDSIGHT** is a joint project of the Lions Clubs of Iowa and the Department of Ophthalmology & Visual Sciences at the University of Iowa Stead Family Children's Hospital, dedicated to enhancing early detection and treatment of vision impairments in young children (target population 6 months of age through kindergarten) in Iowa communities through screening and public education.

This manual was originally prepared by:  
Wanda Pfeifer, Photographic Reader

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Iowa KidSight Review Packet Current Revisions: September 2024

For further information about Iowa KidSight, please contact:

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**[www.iowakidsight.org](http://www.iowakidsight.org)**

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### **Iowa KidSight Personnel:**

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Operations Specialist: Wendy Cadena  
Follow-Up Coordinator: Jama Lidral  
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### **Iowa Lions Project Director: Jerry Inman**

### **Medical Advisor Board:**

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### **Iowa KidSight Steering Committee:**

Dr. William Scott, M.D. - Medical Director  
Chelle Lehman - Iowa KidSight Program Manager  
Wanda Pfeifer, OC(C), COMT - Iowa KidSight Photo Interpreter  
Wendy Cadena - Iowa KidSight Operations Specialist  
Jama Lidral - Iowa KidSight Follow-Up Coordinator  
Jerry Inman - Iowa Lions Project Director  
Dale Schrad, Iowa Lions Foundation President  
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# Screening Event Processes

**Note:** All participants must complete an Iowa KidSight Training Course.

## 3-4 Weeks in Advance

Contact childcare center and ask permission to screen.

Secure screening team.

Contact District Coordinator to request screening equipment and supplies, if necessary.

## 2 Weeks in Advance

Copy Consent/Result Form, Informational Brochure, and Club Flyer.

Give forms to childcare director to distribute to parents.

Possibly visit site to determine session location and details surrounding screening event.

Secure all supplies needed to conduct screening (stickers, posters, etc.), and make arrangements to pick up equipment if necessary.

## 48 Hours in Advance

Check battery indicator on screening device. Charge if necessary.

Review iScreen device operations and 4 F's.

## At Screening

Check Consent Forms to ensure that they are completely filled in: parent's signature, child's date of birth, parent's name and contact information, etc.

Confirm all photographs are readable. **Ask** your 4Fs questions!

Retake any photographs that appear unreadable or questionable.

At the end of a child's screening, give the child a sticker as a reward.

## **iScreen Digital Device Processes at Screening:**

With the iScreen device, enter the child's first and last name, date of birth (MM/DD/YY), and screening site name. **Ensure that you enter this information accurately as this will print on the Result Form going to the parent/guardian.** If child's name includes a hyphenated last name and you run out of character spaces, enter the child's first letter of his/hers first name and then the full hyphenated last name (ex. Penelope Hernandez-Gonzalez should be typed as P. Hernandez-Gonzalez).

You can use abbreviations for screening site names as well if you run out of space when typing, but please be sure they are standard abbreviations. Examples: PRE=Preschool, HS=Head Start, etc. Remember that what is entered into the iScreen device is what is printed on the result form that is returned to the parents so the site name needs to make sense.

Do not save an *unreadable* iScreen image. It is ok to save *readable* second or third images of the same child if necessary, enter 2- or 3- before the child's name when doing so.

Keep the Consent Forms in the order that you took the pictures.

The screening site name you input into the device must match what you write on the Screening Cover Sheet. This field only has to be entered once while the device is turned on; it will remain the same for each child that is entered at the screening until the device is turned off. (Enter "Training" in the Dr./Site field if utilizing to train or practice.)

Misc. Notes: Do not shine red aiming lights in the children's eyes. Start above child's head and bring dots down to ~brow-line on forehead. The red dots can vary slightly between cameras as to where they need to project on the child's forehead (up a bit or down a bit). The dots also may not always come together as one dot, rather they may be more like a snowman shape with one on top of the other. This isn't a problem unless your pictures are out of focus.

## **Post Screening**

Thank screening site director/contacts.

Mail all completed Consent Forms and completed Screening Cover Sheet by First Class Mail ASAP (within 1 or 2 days of the screening date) to:

**Iowa KidSight  
2431 Coral Court #5  
Coralville, IA 52241**



Transmit digital images. Screenings will not be interpreted and processed until Consent Forms *and* images have been received. To transmit: plug Ethernet cable into port on left side of iScreen device, then plug the other end into an Ethernet jack (or Router). Turn the iScreen device on and once the Home screen is displayed press the "Send Image" key to initiate the transmission. A status of the transmission is shown on the display as files are uploaded. When complete, the display will indicate so. Pressing the "Home" key will return you to the Home screen.

## **Processing Results**

Once the Iowa KidSight office receives the Consent Forms and the completed Screening Cover Sheet for each Site, they will be matched with the images. The images will then be interpreted by the Photo Reader. Information from the Screening Cover Sheet and the Consent Forms as well as the screening result will be entered into the KidSight Database.

The Screening Sites will receive a summary of screening results in addition to a Result Form for each child that was screened which should be returned to the parents. For any child that was referred to an eye care professional there will be a Referral Packet to be returned to the parents.

The Lions Club will receive (either by email or by mail) a summary of the screening and any Retake Forms for children who need Borderline or Photo Retakes.

## **Borderline & Photo Retakes**

### **When Retake/Borderline Retake Forms are received:**

Contact Photographer and screening site director to determine retake date.

Contact District Coordinator to make sure equipment is available on proposed date, if necessary.

Make arrangements to get an iScreen device if necessary.

Retakes and borderline retakes should be done separately from new screens.

Write the date that the retake or borderline retake photograph was taken on the top left side of the Form in the space provided.

When using the iScreen device, type an R- in front of the child's name when entering information into the device for a retake and type a BR- in front of child's name for a borderline retake.

The word Retake and Site Name should be included in the Dr./Site field (please enter the word Retake after the site name. For example: LITTLE LAMB PRE RETAKE or WEST UNION HS RETAKE.

It won't be necessary to get new Consent (/results) form signed, because the original is on file in the Iowa KidSight office. It's also not necessary to send in a screening cover sheet with the retakes or borderline retakes.

Mail to: **Iowa KidSight**  
**2431 Coral Court #5**  
**Coralville, IA 52241**

## **Supervision of Lions Club Screeners New to Screening**

Each District develops a hierarchy of experienced screeners to supervise Photographers and Recorders new to Iowa KidSight screening.

Photographers and Recorders must first attend an Iowa KidSight Training Session.

- At Photographer's/Recorder's first screening, supervision is provided by his/her Trainer or other qualified personnel.
- When a Photographer/Recorder has completed one supervised screening event, and one unsupervised screening event, with less than 5% photo retakes, as determined by Photo Reader at UIHC, and maintains a less than 5% retake rate, then he/she is qualified to provide supervision to other Screeners new to Iowa KidSight screening events.

Remember that the goal is to screen as many children in your district as possible in the target age range. Once your club has screened at a child care site, you should go back and re-screen the children at that site yearly.

Your club can screen at sites outside of your town, but as a courtesy to neighboring clubs, be sure to ask the District Coordinator if this is OK, and ensure good communications with neighboring clubs when making screening arrangements.

# The 4 F's Digital Device Quick Review

Each picture should always be checked for the 4 F's:


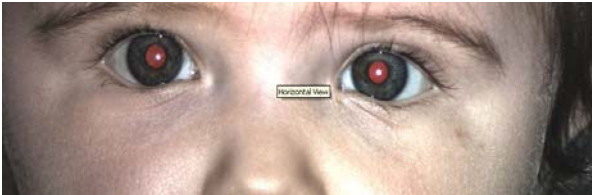
**1. Fixation:** the white dots (fixation dots) should be in the same location (center of the pupil or slightly nasal) in both eyes; pupils should be a consistent color (red or dark brown) with no white tones.

iScreen Home Page

## Patient Information

Name/ID....	Lisa Lee
DOB.....	11/4/2010
Dr/Site.....	Little Peoples Daycare

Acquisition Complete - Save? (Y / N)



Horizontal Flash Vertical Flash

Flash: Ready  
Images Not Sent: 7

Capacity:  
33/2000  
Fri Apr 5 2013 09:45:33

### Fixation Problem:

The child is looking up a little. The white fixation dot is not in same place in each eye, and the pupil is not consistent in color.


**2. Focus:** no blurry or rectangular-shaped fixation dots in center of pupil, or blurry photos.

iScreen Home Page


### Patient Information

Name/ID....	LaJames Jones
DOB.....	11/9/2009
Dr/Site.....	Iowa City Daycare

Acquisition Complete - Save? (Y / N)



Horizontal Flash



Vertical Flash

Flash: Ready  
Images Not Sent: 1

Capacity:  
14/2000  
Thur Mar 12 2012 11:24:23

**Focus Problem:**

The white fixation dots are elongated, not a pin-point as they should be.

Facial features can also appear blurry.

Make sure that the two red aiming dots from the iScreen device are coming together to make one red dot on the child's forehead which ensures proper distance from the child.



3. (Greater than) **Four mm pupils:** Pupils should look larger than the iris.  
Nice and big!

iScreen Home Page

### Patient Information

Name/ID.... Amanda Lee  
DOB..... 6/19/2007  
Dr/Site..... St Johns PM

Acquisition Complete - Save? (Y / N)



Horizontal Flash Vertical Flash

Flash: Ready  
Images Not Sent: 6

Capacity:  
41/2000  
Thur Mar 19 2013 10:35:23

**(Less than) Four mm Pupil Problem:**

These pupils appear small. They are barely larger than the white fixation dots.  
The size of the iris is much larger than the pupil.  
The pupils must be greater than 4 mm to be readable.


**4. Four pupils:** must be able to see the complete pupils of all four eyes

iScreen Home Page


### Patient Information

Name/ID....	Liam Nelson
DOB.....	12/3/2008
Dr/Site.....	Little Peoples Daycare

Acquisition Complete - Save? (Y / N)



Horizontal Flash



Vertical Flash

Flash: Ready  
Images Not Sent: 3

Capacity:  
22/2000  
Thur Mar 19 2012 11:24:23

**Four Pupil Problem:**

Not enough pupil showing in right picture. The eyelid is down over part of the pupil.



## A 4F's Guide for Your Recorder/Photographer

Ask the five questions below after taking a picture of a child. If you have answered “yes” to all of the questions, the images are readable. If the answer is “no” for any question, take another picture. Stop when both the left and right images are readable.

### 1. Can you see both pupils?

Yes, continue . . .

No? Photo is not readable.



### 2. Are the pupils nice and big (appear to be greater than 4 mm)?

Yes, continue . . .

No? Photo is not readable.



### 3. Is the light reflex (white dot) round in each pupil?

Yes, continue . . .

No? Photo is not readable.



### 4. Is the light reflex in the center of each pupil?

Yes, continue . . .

No? Photo is not readable.



### 5. Double check the last question; it is the hardest to determine. Are the white dots in the **CENTER** of **EACH** pupil? The pupils should be consistent in color too.

Yes, photograph is readable!

No? Photo is not readable.

**After asking all questions, if still unsure about whether photo is readable, save the photo, re-enter child's information and take another!**

Compare your images to this one.


Digital device photo goal:

iScreen Home Page

### Patient Information

Name/ID.... Laura Smith  
DOB..... 3/15/2012  
Dr/Site..... St Johns Preschool

Acquisition Complete - Save? (Y / N)



Horizontal Flash Vertical Flash

Flash: Ready Capacity: 43/2000  
Images Not Sent: 12 Thur Dec 11 2016 09:55:23

**FOUR pupils!**

**Pupils are nice and big, larger than FOUR millimeters!**

**Eyes are in FOCUS, white fixation dots are round/pinpointed!**

**FIXATION dots are in the center of each eye!**

If all photos looked like this, there would be **NO** retakes.  
If at all unsure, save another image.



## iScreen Equipment Care

- Charging time is approximately 2 to 3 hours depending on the state of charge remaining in the battery (see battery indicator on top right of display screen).
- Charge the device (see pages 11 & 12 of iScreen manual) at least every 30 days to maintain the battery life.
- Device can be used at screening with the AC/DC adapter if battery power fails.
- Avoid exposing device to extreme heat or cold. Do not store in car.
- Keep display screen and lens wiped cleaned with a dry soft cloth.
- Do not use cleaning wipes or cleaning chemicals on the device.
- Clear the log/erase records during a time when you have received all of your screening results back (see page 26 of iScreen manual).

**If you have camera problems, please call your District Coordinator or the Iowa KidSight office (319-353-7616).**

## iScreen Troubleshooting Notes and Tips

### Getting double fixation dots:

- Clean the camera lens – any smudges or dust will cause the appearance of double fixation dots
- When conducting a screening, be sure that there isn't any light source from an open door or window or overhead light interfering with the flashes.
- Check the red LED beam alignment by placing the camera on a table and arming the device. Move the camera forward or backward until the beams are aligned. If the beams do not converge into one dot, the misalignment may be causing the appearance of double dots.

## **iScreen device troubleshooting notes and tips (continued):**

### Won't hold a charge

- When was the problem first noticed?
- How long will it hold the charge once unplugged?
- Does it work properly when plugged in?
- Did the camera sit on a shelf for an extended period of time without being used? If so, how long?

From the iScreen User Manual: To maximize your battery life, it is best to only charge the battery when the on-screen battery indicator shows the battery level is low.

The device battery must not be allowed to drain completely or the battery may lose its ability to maintain a charge. If you are **NOT** going to be using a device for 30 days or more you must make sure it's **fully charged** before storing the unit.

You should check the battery level on the device monthly and recharge it to make sure it does not get fully drained. It is not necessary to keep the device plugged in, only that it is fully charged before letting it sit unused for a period of time.

Ensure that the charging cords are snugly plugged together.

Ensure that the charge light indicator is illuminated on the side of the camera when charging.

### Flash is not working? Note:

- Does it happen on the horizontal image, the vertical image, or both?
- How often does the problem occur?
- Is this something new you have noticed?

## **iScreen device troubleshooting notes and tips (continued):**

### Keyboard issue? Note:

- Describe the issue – do the keys respond sometimes but not others?
- Does the issue appear to be limited to certain keys?
- Does increasing the pressure on the keys seem to help?
- When was the issue first noticed?

### **ALL-PURPOSE TROUBLESHOOTING NOTE:**

It somehow seems like an inconvenience, but “rebooting” fixes many problems by resetting systems. The iScreen device *is* a computer. If you shut the device off, then wait a couple minutes (literally, wait two minutes or it won’t have time to completely power down systems), and then turn the device back on again, the problem just might be fixed!

### Network is down:

This is typically a problem between the Ethernet connection and the network. Check the cable; make sure it is securely fastened to the unit and to the network outlet. Make sure you are plugged into a live Ethernet jack. If you continue to receive error messages, there could be a problem with the network or server. Ensure that your network configuration is 1) not blocking access to the domain ([www.iscree.com](http://www.iscree.com)) and 2) allows outbound FTP. If you have verified those settings and still cannot transmit, call iScreen Vision technical support at 901-201-6132 for assistance.

**If you have any iScreen device problems, please contact your District Coordinator or the Iowa KidSight office. All repair needs should be coordinated through the Iowa KidSight office.**

## **Background Check Guidelines (from KidSight USA, Lions Clubs International)**

- Lions should follow what the local agency you are screening for requests.
- Lions should follow any local legal jurisdiction (city, town, etc.) requirements.
- Always follow the below procedures for “How to interact with children safely and effectively.”
  - Never be alone in a room or confined space with a child.
  - Have a teacher, school nurse, or teacher’s aide help line the children up and keep them occupied until it is their turn.
  - Try not to have the waiting children interact with the child being tested.
  - Don’t have too many lined up at one time.
  - Don’t show frustration if a child is not cooperating. Retest on another day if necessary.
  - Do not touch the children. If they need direction in standing/sitting in the proper location, have school/site personnel do this.
  - Give clear instructions as to where the child should look.
  - If you give out stickers to the children to wear after the screening, you should hand it to them so the child can place it on him or herself. Remind the child to put the sticker on clothing. You may also hand the sticker to the school personnel for placement. Do not place the sticker on the child yourself.