

Welch Allyn Spot™ Vision Screener

Revolutionizing
vision screening
in children



Failing to detect amblyopic risk factors in children may lead to partial or full blindness or issues with child development or social-emotional behavior.



1/4 school-age children suffer from a vision disorder.²



Vision disability is the single most prevalent disabling condition among children.¹

Experience the Difference:

How does the Spot™ Vision Screener work?

LAUNCH screening in one-touch and **CAPTURE** screening results in both eyes in seconds

SHARE on-screen data results with parents, print and discuss follow up care

SAVE screening results to patient record to support coordination of care



OBJECTIVE AND CONSISTENT CARE

- Automated, objective vision screening reduces risk of missing pre-amblyopic and amblyopic risk factors in children
- Pass/Refer results help support accurate referrals to eye care specialists; no interpretation of results is needed by screener

SUPERIOR USER AND PATIENT EXPERIENCE

- Touchscreen display and point and shoot technology makes it easy for healthcare providers to screen and read results
- Requires minimal staff training and minimal cooperation from the patient

COORDINATION OF CARE

- Import/export patient data into records through connectivity port
- One-page vision screening summary reports help educate parents and inform follow-up decisions

Spot Vision Screener technology is changing the way routine vision screening is done.

Policy Guidelines strongly recommends instrument-based vision screening

The American Academy of Pediatrics (AAP) supports instrument-based vision screening as an alternative to visual acuity testing with eye charts (snellen chart, optotypes). These techniques have better success after 12 months of age and can be repeated at each annual preventative medicine encounter through 5 years of age or until visual acuity can be assessed reliably.⁴

6 mos - 3 yrs (pre-verbal)

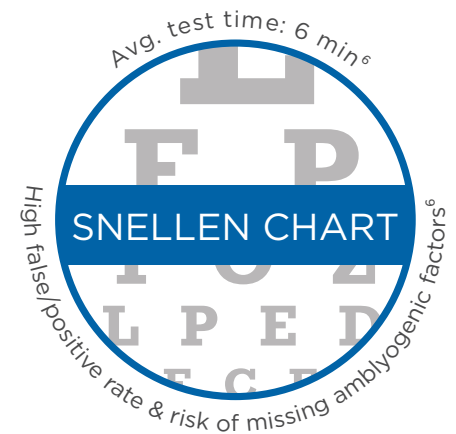
Ideal stage to detect amblyopic precursors

4 - 8 yrs (assess school readiness)

Final opportunity to detect amblyopic conditions through refractive measurements

9 - 15 yrs (adolescence)

Changes in vision are common as the body grows; 1 in 4² children in this stage have a vision issue



One study has shown Snellen acuity measures in older children resulted in a 21% under-referral rate⁷

Spot Vision Screener

can screen for and detect six amblyopic risk factors in children as young as 6 months.

- Myopia (nearsightedness)
- Hyperopia (farsightedness)
- Astigmatism (blurred vision)
- Anisometropia (unequal refractive power)
- Strabismus (eye misalignment)
- Anisocoria (unequal pupil size)



Instrument-based photoscreening that is deemed medically necessary may be covered under private payer and Medicaid programs using CPT code⁵ --

99177 Instrument-based ocular screening, onsite analysis



Ordering Information

VS100-B	Spot Vision Screener, power supply and cord, wrist strap
VS100S-B	Spot Vision Screener, power supply and cord, wrist strap and carry case
Accessories	
106144	Spot Vision Screener Carry Case
106146	Spot Vision Screener Wrist Strap
106145	Spot Vision Screener Neck Strap
106147	Spot Vision Screener Power Supply and Cord
Partners in Care Service Support Programs*	
S1-VS100	Partners in Care Comprehensive Partnership Program, 1-year
S1-VS100-2	Partners in Care Comprehensive Partnership Program, 2-year
S1-VS100-5	Partners in Care Comprehensive Partnership Program, 5-year

* Add "C" to the end of each Spot Vision Screener Partners in Care Program to order calibration with your device service.

¹ Centers for Disease Control and Prevention: Improving the Nations' Vision Health: A Comprehensive Public Health Approach. http://www.cdc.gov/vision-health/pdf/improving_nations_vision_health.pdf

²⁻³ Source: Zabba, Joel N. "Children's Vision Care in The 21st Century & Its Impact on Education, Literacy, Social Issues & the Workplace: A Call to Action." Journal of Behavioral Optometry (2011)

⁴ Source: American Academy of Pediatrics, Instrument-Based Pediatric Vision Screening Policy Statement, published in Pediatrics, The Official Journal of the American Academy of Pediatrics, October, 2012.

⁵ Reimbursement coverage varies; check with your payers for coverage decisions and criteria for coverage

⁶ Salcido A., Bradley J., Donahue P. "Predictive Value of Photoscreening and Traditional Screening of Preschool Children." Journal of AAPOS: 2005.

⁷ Paech, M. "The Orinda Study: should the 'modified clinical technique' retain its 'gold standard' status as a vision screening tool?" Clinical and Experimental Optometry: 2010; 93: 1: 31-36.

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