

**Vision Screening Follow-up for Translator**

Date of Notification: \_\_\_\_\_

Name of Translator Contacted: \_\_\_\_\_

Dialogue:

Your student \_\_\_\_\_ failed the vision screening at school. He/she is being referred by the school nurse for an eye examination by an eye doctor (optometrist). I am calling to follow up.

Did you receive the referral letter the school nurse sent out? Yes or No

Have you been able to take \_\_\_\_\_ in for an eye examination? Yes or No

If No: Has \_\_\_\_\_ she/he \_\_\_\_\_ ever had an eye examination? Yes or No

If Yes: Did \_\_\_\_\_ she/he \_\_\_\_\_ get glasses? Or a prescription for glasses? Yes or No  
Do you remember when she went in for the eye examination? Do you remember why she/he got glasses? Near sighted, far sighted, astigmatism, amblyopia.

Do you have vision insurance? Yes or No Do you have Medicaid? Yes or No

If No: I have a few resources that I can refer you to for a free eye examination. The People's Health Clinic offers free eye examinations if you do not have insurance. If you student needs glasses, the glasses are \$35.00. You will want to verify the price when you call for the appointment because it changes often. They do have people on staff that speak Spanish. I also have vision vouchers that offer a free eye examination and a free basic pair of glasses if you qualify. The qualifications are based on income and family size, no insurance, under the age of 18, and a social security number. Are you interested in seeing if you qualify for a voucher? What is your family size? If your income is less than \_\_\_\_\_ (see attached voucher qualifications) you will qualify. I will need a copy of \_\_\_\_\_ social security number.

Referred to: People's Health Clinic, VSP Voucher, other \_\_\_\_\_.

Notes:

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