

H = 2.20 pm
T = 2.30 pm
M = 2.40 pm

EYE SCREENING PROFORMA FOR DIFFERENTLY ABLED

Date: 27/06/23

Name & Age Fenasitha - K.J. / 1 year old.
2 months

Accompanied by:

Type of disability : C.P/Autism/ADHD/Down's syndrome/Speech Delay/Hearing
impairment/Motor Delay/Others

Language disorder

Bt at - 800 g

BIRTH HISTORY

Term

: Full Term/Pre Term/Post Term

: Normal/Caesarean/Forceps/Vacuum

Antenatal period & neonatal period:

GENERAL HISTORY

NICU x 1 month, delayed milestone

Any history of seizures/fever/allergy till date? If yes, mention the same.

1/0 seizures on medicine
(8 months)
1/0 phototherapy

Current/past medications.

Baby was in Ventilator for 7 days
on O2 via nasal prong.

Parents/caregivers opinion on current visual skills of child.

Nif

Previous history of ocular evaluation/surgery/medication/follow-up till the date.

Parents/congenital appraisal on ophthalmic rehabilitation.