# What Now : For Your Ophthalmologist

Dear Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_

I suspect my child has Cortical Visual Impairment.

“Cerebral/Cortical Visual Impairment (CVI) is a neurological visual disorder. Vision loss or impairment due to brain injury or disease can occur at any point in the life-span….It is a condition that indicates the **visual systems of the brain do not consistently interpret or understand what the eyes see.** The degree of neurological damage and CVI depends upon the time of onset, as well as the location and intensity of the damage.” *http://Tech.aph.org/cvi*

I suspect that \_\_\_\_\_\_\_ has CVI because she has a history of \_\_\_\_\*\_\_\_\_ or a diagnosis of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\*(Prematurity, Neurological insult, Pachygyria, Lissencephaly, Cerebral Palsy, Prenatal Stroke, Hypoxia, Ischaemia, Ashphyxia, Intraventricular Hemorrhage, Developmental Brain Anamolies, Hydrocephalus, Encephalitis, Meningitis, or Head Injury )

AND

She received a normal (or almost normal) eye exam that does not explain her visual behavior. CVI may exist with an ocular impairment as well.

I suspect that \_\_\_\_\_\_\_\_\_\_\_\_\_ has CVI because she exhibits the following common behaviors of infants and toddlers with CVI:

* Light gazing (staring without blinking into a bright light source, open window, or at the bright sky)
* Absent or atypical visual reflexive responses (fails to blink when touched on the nose, or when an object is moved quickly to her face)
* Uses her peripheral vision more effectively than central vision (doesn’t look us in the eye)
* Visual latency (visual responses are slow, often delayed)
* Look and touch behaviors are separate (she looks, turns head away from item, then reaches for the object…and this may take some time)
* \*

\*(More behaviors can be found at the CVI page of the American Printing House for the Blind website. <http://tech.aph.org/cvi/?page_id=1175>*)*

It is important for \_\_\_\_\_\_\_\_\_\_\_ to receive a diagnosis of CVI, if appropriate, so that we can begin early intervention services accommodated to her CVI.

**The treatment for CVI is specialized early intervention** for her unique learning needs.

**CVI can improve** with specialized early intervention services provided by a Teacher of the Visually Impaired, or a Developmental Therapist with **an endorsement in working with children with CVI.**

**Without CVI accommodations** in every category of her early intervention plan, **\_\_\_\_\_\_\_\_\_\_\_ will not have access** to the therapies in her IFSP. Also, it is important for us, her family, to better understand how \_\_\_\_\_\_\_\_\_\_’s vision loss is affecting her development and how we can help her vision improve. **Her vision can improve.** We will not achieve the full benefit of her IFSP without addressing her diagnosis of CVI.

If you suspect CVI, please tell me and give us a diagnosis we can take to our Early Intervention team. **This is not the time to “wait and see.”** There are assessment and intervention strategies for CVI that must be a part of the educational program.

A diagnosis of CVI with a prescription for CVI accommodations would help us attain the services \_\_\_\_\_\_\_\_\_\_\_\_\_ needs to get the best possible start.

Thank you very much for your consideration and for your dedication to my child.

With gratitude,