Visual Acuity Testing in Adults
Are Your Nurses Checking All the Boxes?

Did you know that patients 65 years of age and older are at an increased risk for multifactorial causes of diminished visual acuity? Visual acuity testing is performed because untreated visual impairment can lead to academic, job performance and psychosocial problems as well as increased risk for falls, accidents and injury. Additionally, unaddressed visual impairments can negatively impact the quality of life of all patients, but especially older adults.

Check out the Dynamic Health™ competency checklist below to see if your nurses are checking all the boxes when it comes to their visual acuity testing skills as they relate to adult patients.

1. Review the facility/unit-specific protocol for visual acuity testing, if one is available
2. Review the treating clinician’s order for visual acuity testing, if one exists
3. Note that visual acuity testing is a component of a well-patient examination, and a specific order is not required
4. Review the patient’s medical history/medical record

Like what you saw?

There’s lots more where this came from. Dynamic Health’s innovative new evidence-based tools affect thousands of clinicians who skills gaps according competency checklists to help nurses and allied health professionals master critical skills. Users will find current, relevant, evidence-based information on core nursing competencies, transcultural care, patient training, occupational therapy, speech therapy, nutrition and dietetics, social work and so much more.

PRE-PROCEDURE STEPS

1. Follow standard post-procedure steps
2. Arrange for follow-up evaluation by an ophthalmologist/optometrist if abnormalities are identified

PROCEDURE STEPS

1. Ask the patient to remove glasses or contact lenses, if applicable, to test uncorrected visual acuity
2. Verify that the room is well-lit
3. Instruct the patient to stand or sit 20 feet from the Snellen or tumbling E eye chart, to test far vision
4. Assist the patient to gently cover the left eye with a plastic paddle or similar item, while keeping both eyes open
5. Do not allow the patient to place pressure on the eye as this can temporarily alter the visual acuity
6. Instruct the patient to use one hand with the fingers extended to indicate the direction that the “fingers” of the E are pointing, if using the tumbling E chart
7. Remind the patient that, if unsure of a letter/item, it is acceptable to guess