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**Vision, Audiometric and Postural Screenings**

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Vision, Audiometric and Postural Screenings

Sec. 10-214-1. Definitions

(a) “Audiometric screening” means the process for identification of individuals who are suspected of having hearing sensitivity which differs significantly from the standards as set forth in Section 10-214-3 of these regulations.

(b) “Defect in vision or disease of the eyes” means abnormality in visual acuity.

(c) “Equivalent screening” means use of a test for vision screening other than the Snellen Chart which tests the distance acuity of each eye.

(d) “Impairment or defect of hearing” means failure to respond appropriately to puretone stimuli at designated hearing levels on two successive screenings as set forth in Section 10-214-3 of these regulations.

(e) “Postural screening” means observation for the physical signs which have high correlation with postural problems as set forth in Section 10-214-4 of these regulations.

(f) “Postural problem” means scoliosis, an appreciable lateral deviation of the spine, or kyphosis, an abnormally increased convexity of the thoracic spine, as defined in Section 10-214-4 of these regulations.

(g) “School Nurse” means a registered nurse or nurse practitioner appointed and qualified pursuant to Section 10-212 of the Connecticut General Statutes and its regulations.

(h) “Screening” means the presumptive identification of disease or physical defects by the application of brief tests. The screening procedures described in these regulations shall also serve to meet like requirements of health assessments as mandated by Section 10-206.

(i) “Snellen Chart” means the standardized test using identification of letters or symbols to measure visual acuity.

(j) “Vision screening” means testing for visual distance acuity in each eye as set forth in Section 10-214-5 of these regulations.

(Effective July 1, 1981)

Sec. 10-214-2. General requirements

All screenings shall be subject to the following requirements:

(a) Personnel: Screenings shall be performed by trained personnel under supervision and in accordance with procedures approved by qualified medical or nursing personnel employed for such purpose by local or regional boards of education, such as a School Medical Advisor appointed pursuant to Section 10-205 of the Connecticut General Statutes or a School Nurse appointed pursuant to Section 10-212.

(b) Environment:

(1) Screenings shall be performed in an area which is clean, properly lighted and ventilated.

(2) A source of clean drinking water and a toilet shall be readily available on the premises.

(3) Facilities shall be available for washing of hands and cleaning of equipment.

(c) Equipment:

(1) Equipment shall be appropriate for the screening required.

(2) Equipment shall be in good working order.

(d) Screening:

(1) Screening shall be performed individually to minimize distraction and to ensure accuracy and privacy.
(2) Each pupil failing to meet the standards of a vision, postural or hearing screening test shall be rescreened. If the results of the second screening confirm the findings of the first, the parent or guardian shall be given written notice which shall include a brief statement describing such findings. If the findings of the second screening indicate a possible need to modify a child’s educational program, appropriate school personnel shall be notified.

(3) Pupils in ungraded classes shall be screened on the basis of age equated to the grade level of the pupil’s age peers.

(4) Written notice shall be given annually of all the screenings which will be conducted within the school district.

(5) Screenings shall be completed by June thirtieth of the school year in which mandated.

(Effective July 1, 1981)

Sec. 10-214-3. Audimetric screening

(a) Personnel: School nurses, registered nurses, speech pathologists, audiologists, trained aides to school nurses, licensed practical nurses, and trained volunteers may perform audimetric screening. All persons who conduct audimetric screening shall have completed six (6) hours of training in this area including practice supervised by a properly trained school nurse, speech pathologist or audiologist. Children under age six (6) or handicapped students shall be screened by persons with specific training and experience in screening children in these categories.

(b) Environment: Screening shall be performed in an acoustic environment sufficiently quiet for a subject with normal hearing sensitivity to hear the test stimuli at the screening levels.

(c) Equipment: (1) Audiometers used shall provide calibrated puretone stimuli at each of the following frequencies for each ear: 1,000, 2,000, 4,000 Hz, at a hearing level of 20 dB for 1,000 and 2,000 Hz and 25 dB at 4,000 Hz.

(2) Audiometers used shall meet the current American National Standards Institute specifications for audiometers and shall be assessed at least annually for adequate calibration. A statement showing the date and results of last calibration shall be kept with each audiometer.

(d) Screening: Each pupil examined shall receive calibrated puretone, air-conducted stimuli for each ear at the following frequencies and levels: 1,000 Hz, (20 dB), 2,000 Hz, (20 dB) and 4,000 Hz (25 dB). In lieu of puretone audiometric screening, tympanometric procedures may be substituted where it can be shown that identification of conductive and sensori-neural impairments is not significantly affected.

(e) Standard: A pupil who fails to respond to one or more of the three required screening frequencies in either ear shall be suspected of having an impairment or defect of hearing pursuant to Section 10-214 of the Connecticut General Statutes and defined by Section 10-214-1(d) of these regulations.

(Effective July 1, 1981)

Sec. 10-214-4. Postural screening

(a) Personnel: Postural screening shall be performed by a school nurse, registered nurse, or physical education teacher trained in such screening methods.

(b) Environment: Each local and regional board of education shall adopt procedures for the conduct of postural screening to ensure privacy.

(c) Screening:

(1) The parent or guardian and the pupil shall receive information prior to the screening to acquaint them with said screening.
(2) Clothing or a gown shall be arranged so that the entire back including the waist line and the hip line shall be observed without covering.

(3) Observation for scoliosis and kyphosis shall consist of five key signs:
(a) rib or flank fullness upon forward bend;
(b) shoulder height difference;
(c) shoulder blade prominence;
(d) waist line or hip asymmetry; and
(e) obvious curve or crease in back.

(d) **Standard:** A pupil observed to have rib or flank fullness upon the forward bend or any three of the other key signs shall be found to have a postural problem pursuant to Section 10-214 of the Connecticut General Statutes, and defined by Section 10-214-l(f) of these regulations.

(Effective July 1, 1981)

**Sec. 10-214-5. Vision screening**

(a) **Personnel:** Any individual trained in screening methods recommended by the Connecticut Society to Prevent Blindness or equivalent methods may conduct vision screening.

(b) **Environment:** The examining area shall be well lighted and screening charts shall be clean and free from glare.

(c) **Equipment:** The Snellen Chart in the form of wall charts, cards and projection slides with standard illumination or an equivalent screening device shall be used.

(d) **Screening:**
(1) When the Snellen Chart is used, the screening shall be administered at a twenty (20) foot distance from the chart.
(2) Pupils who wear glasses shall be screened with glasses.
(3) The pupil shall be asked to read the letters with each eye separately for visual acuity.

(e) **Standard:** A pupil who fails to read with either eye one more than half of the 20/30 line in kindergarten through grade three (3), or fails to read one more than half of the 20/20 line in grade four (4) and above or in any grade is found to have a one line discrepancy between the two eyes shall be found to have a defect in vision or disease of the eyes pursuant to Section 10-214 of the Connecticut General Statutes and defined by Section 10-214-l(b) of these regulations.

(Effective July 1, 1981)