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## **NEURO VISION REHABILITATION**

A traumatic brain injury often affects a person's vision. Most often, it can affect an individual's ability to tolerate bright lights, and causes difficulty with reading and computer work, and tolerating busy visual environments. These issues can affect a person's ability to successfully return to school, work, and sports. Vision problems are common after a TBI; between 40-60% of people who have visual symptoms and are referred to a developmental optometrist are found to have visual dysfunction as a result of their injury.

At Niwot Vision, we have a traumatic brain injury residency trained optometrist who treats our patients and oversees the vision rehabilitation. We believe this is the best mode of practice for treating patients suffering from visual dysfunction. The visual system is complex, and multiple factors need to be taken into consideration when developing a treatment plan, including, ocular health, refraction, visual motor and visual perceptual function. Very often patients have several issues affecting their visual function and these all need to be addressed concurrently. Lenses, prisms, filters, and tints can often be prescribed which can be a major help for a patient suffering from visual symptoms.

**Neuro Vision Rehabilitation (NVR)** is a sequential process by which the visual system is able to be rehabilitated through neuroplasticity. Using paper and pencil as well as dynamic computer programs we are able to improve the accuracy of eye movements on the two- and three-dimensional plane. Using increasing powers of lens and prisms we are able to build flexibility back into the visual system, so that the patient can adapt to difference focal points. These are just some of the treatment goals of NVR.

### **Q. Who should be referred for a Neuro Vision Rehabilitation Evaluation?**

Any patient who has sustained a traumatic brain injury who has persistent visual symptoms, headaches or dizziness from their injury,(please see the questionnaire in the back of this page for details)

## Suggestion to identify patients who can benefit from a neuro optometric evaluation

Please have patient fill out this vision survey:

- If the patient rates **any** of the symptoms a **3** or greater, this warrants a referral
- If the patient rates **multiple symptoms** a **2** or greater, this warrants a referral
- We recommend that the patient fill this survey out even if they had an eye exam since a traditional “eye exam” is often unable to detect visual deficits from a TBI.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

Please complete this questionnaire. After each symptom listed, circle the number that best describes how often you **currently** experience that particular problem. 0 = Never, 1 = (not very often) infrequently, 2 = sometimes, 3 = fairly often, 4 = always.

1	Blurry vision at distance (if you have glasses, with them on)	0	1	2	3	4
2	Blurry vision at near (if you have glasses, with them on)	0	1	2	3	4
3	Difficulty transitioning between distance and near	0	1	2	3	4
4	Pressure or pain behind or around the eyes	0	1	2	3	4
5	Covering or closing one eye to see more clearly	0	1	2	3	4
6	Double vision	0	1	2	3	4
7	Fatigue/ eyes feel tired with reading or computer use	0	1	2	3	4
8	Headaches when reading / performing visual tasks	0	1	2	3	4
9	Losing your place when reading	0	1	2	3	4
10	Difficulty being in busy visual environments, or tolerating visual movement or patterns	0	1	2	3	4
11	Restricted field of vision / reduced peripheral vision	0	1	2	3	4
12	Sensitivity to light	0	1	2	3	4