

InfantSEE™ training finds real vision problems



Alaina Soza gets acquainted with eyeglasses as her father, Carlos, and brother, David, watch closely.

Optometrists attending the 2006 Alabama Optometric Association (ALOA) Convention in October had the opportunity to get hands-on experience performing InfantSEE™ assessments on babies, one of whom was found to have an extremely high refractive error.

The InfantSEE™ workshop was held Oct. 27 at the University of Alabama at Birmingham (UAB) School of Optometry and was designed to allow doctors to increase their experience and comfort in performing infant assessments.

Jennifer Alverson, O.D., Alabama InfantSEE™ state leader; Lynn Hammonds, O.D., AOA InfantSEE™ Committee member; Amanda Buttenshaw, ALOA executive director; and UAB School of Optometry pediatric faculty Katherine Weise,

O.D., and Wendy Marsh-Tootle, O.D., collaborated in organizing the workshop.

More than 20 ODs and students participated in the workshop and performed InfantSEE™ assessments on 10 infants.

Carlos and Malia Soza, parents of 7-month-old Alaina Soza, heard about the InfantSEE™ program from their optometrists, Dr. Hammonds and Cathie Amos, O.D.

The Sozas scheduled Alaina's appointment for the workshop after attending a Babypalooza event at a shopping mall in Birmingham and visiting the InfantSEE™ booth staffed by Dr. Alverson.

"The booth at Babypalooza was purchased by ALOA and Jason Dickerson, O.D., and I manned the booth. We gave out brochures

and talked with parents and expectant moms about InfantSEE™," said Dr. Alverson. "We already had most of the babies lined up (for the workshop) before Babypalooza. A friend of mine brought one of the babies and two were faculty members' babies. Our local CIBA rep, Tracy Lipscomb, brought her baby, and she recruited another family as well as getting the gift baskets made to give to the moms."

When the Sozas brought Alaina in for her InfantSEE™ assessment during the workshop, they had no previous indication that there was any problem.

"I knew there was a risk with Carlos' history—he had to get glasses when he was 18 months old," said Malia. "But I did not expect this."

Workshop participants Candice Turner, O.D., and Garrison Meighen, O.D., along with faculty member Michelle Anderson, O.D., performed the InfantSEE™ assessment on Alaina, who was diagnosed with +12.00D of hyperopia.

The retinoscopy findings were OD +12.00 -2.25 x180 and OD +11.25 -1.50 x180. The final spectacle lens prescription was OD +9.50 and OS +8.75.

The final prescription was intentionally decreased to allow a slight blur to encourage emmetropization or further natural development of the eye and visual pathways, said

Dr. Alverson.

"So does this mean my baby has never seen my face?" Malia asked Dr. Anderson after getting the prescription for Alaina.

Dr. Anderson explained that Alaina probably could recognize her parents, but likely has extreme difficulty in making out the details in their features.

"It's hard," said Malia. "I don't know how we're going to keep her from taking the glasses off."

The reassured parents, along with Alaina and their 22-month-old son David, were soon directed to the optical department to begin

selecting frames to fit her small face and begin the process of improving her eyesight.

The Sozas said they were grateful for InfantSEE™ and planned to work to increase public awareness of the program.

"I am so very pleased that we accomplished the goal of making the attendees more comfortable with the InfantSEE™ assessments and forms," said Dr. Alverson. "Not only did we help Alaina Soza, but we also equipped 18 fellow optometrists with the knowledge and clin-

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ical skills to help many more like her. And we reassured nine other moms that their babies' visual development and ocular health were normal. With that we can all say that the workshop was a tremendous success."

It was the first InfantSEE™ assessment as a licensed optometrist for Angie A. Ghanayem, O.D., UAB School of Optometry Cornea and Contact Lens resident.

"The course was educational, informative and kept me attentive by stressing the clinical

relevance of the InfantSEE™ assessment techniques and the importance of testing for ocular disease. We reviewed the typical normative ranges for refractive error and prescribing methods used in very abnormal cases. And we discussed the preferred tests and techniques that can be utilized when examining a child's visual acuity, refractive status, visual integration, binocularity, alignment and ocular motility," said Dr. Ghanayem. "InfantSEE™ comprehensive eye assessments for infants are an exceptional opportunity to improve a child's quality of life, developmental and learning stages."

After signing up as an InfantSEE™ provider at the ALOA convention, Dr. Ghanayem said she hopes to increase public awareness of InfantSEE™ and stressed the importance of becoming a provider.

"In the optometric profession, we strive to provide primary ocular



Rachel Hendrix holds 11-month-old Noah as Mike Blackburn, O.D. performs the InfantSEE™ assessment — his 32nd to date.

health care by practicing full scope," said Dr. Ghanayem. "Practicing full scope includes supporting and educating families about the importance of periodic professional eye care, and becoming providers of the InfantSEE™ program in order to make a difference in people's lives by practicing at optometric standards and guidelines and fulfilling the optometric oath to our utmost capabilities."



Angie A. Ghanayem, O.D., UAB School of Optometry Cornea and Contact Lens resident, conducts an eye health assessment.