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**CITT Visual Screening Questionnaire**

Answers may be:

Never = 0

Infrequently = 1

Sometimes = 2

Fairly often = 3

Always = 4

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| --- | --- |
| Do your eyes feel tired when reading or doing close work? |  |
| Do your eyes feel uncomfortable when reading or doing close work? |  |
| Do you have headaches when reading or doing close work? |  |
| Do you feel sleepy when reading or doing close work? |  |
| Do you lose concentration when doing reading or close work? |  |
| Do you have trouble remembering what you have read? |  |
| Do you have double vision when reading or doing close work? |  |
| Do you see the words move, jump, swim, or appear to float on the page when reading or doing close work? |  |
| Do you feel like you read slowly? |  |
| Do your eyes ever hurt when reading or doing close work? |  |
| Do you feel a “pulling” feeling around your eyes when reading or doing close work? |  |
| Do you notice the words blurring or coming in and out of focus when reading or doing close work? |  |
| Do you lose your place while reading or doing close work? |  |
| Do you have to re-read the same line of words when reading? |  |
| A score of 15 or higher is strongly suggestive of a visual problem  (Be sure to tab forward after the final question to see your total) | 0 |