

Excellent Eye Care Begins with InfantSEE

My son was born two days before the first final examination week of my student optometric career. Trying to study in the hospital with a wife recovering from an emergency C-section and a newborn was nearly impossible, but somehow I made it through those finals with good results and have since been able to complete many other final examinations. More importantly, both my wife and my son are very healthy and well to this day. This great event has subsequently allowed me to experience something relatively unique within the student optometric community—very personal involvement in infant vision and development.

I brought my 6-month-old son to the eye clinic for his InfantSEE® examination with one of my professors, who is considered an expert in pediatric optometry. This examination served as an excellent opportunity for me to learn about the components of an infant examination because, as a first year optometry student, my knowledge of the subject was quite limited. During his exam, I observed special techniques in retinoscopy, VOR testing, the OKN drum, and pediatric visual acuity testing. This opportunity made me feel comfortable with infant eye examinations and gave me a foundation on top of which I could begin to build my own future InfantSEE® program.

As a parent still in optometry school, I have set the stage to become a provider for the InfantSEE® program because I have thoroughly invested time and compassion into maintaining my child's health. This gives me insight into the minds of parents who, like me, realize that proactive health care is vital for a healthy life. I enjoy peace of mind knowing that my son does not currently have any

apparent visual or functional problems, and I would like to give other parents that same peace of mind. If their child's development is threatened by vision-related problems, I can help them combat these issues early in life so that their child has the greatest chance of reaching his/her full potential.

Currently, I am able to work with children on a regular basis as a part of my clinical education. My vision therapy rotation, in particular, enables me to gain hands-on experience helping children who may not have had treatment for their visual problems and have thus been led to develop binocular, accommodative, or perceptual problems. Additionally, I am able to give comprehensive examinations to teenagers and young children who present with headaches while reading, a dislike for school work, or other vision-related complaints. While these examinations are not technically the same as an infant exam, they are effective in shaping my examination skills to detect visual problems that may occur in infants as well.

Providing optometric care to infants will not always be an easy task. I know from experience with my own son that examining infants can lead to an eruption of tears, to loud cries, to inattention, or even to complete slumber; but the real challenge begins with the parents. No examinations will occur if the parent or guardian does not bring the child to your clinic. For this reason, it is imperative to inform parents of the remarkable benefit of InfantSEE®. I think that two key ways to connect with today's parents are social media and pediatricians.

Social media is now the go-to source for any type of marketing, including health care programs. I have grown up in the technological age, and I know the incredible impact that likes on a Facebook page or tweets can have

in spreading awareness. Aside from my clinic's typical website, I can invite parents to like the official InfantSEE® Facebook page or my own clinic's Facebook page to find out more about this wonderful program.

Pediatricians can be an excellent source for referring infants to the InfantSEE® program because they will likely see these children many times before an optometrist will. My wife recently spoke with a pediatrician in her hometown, and after mentioning that I was in optometry school and that I might be practicing in the area, he said, "You should have him contact me because I have parents ask me all the time for a vision referral, but I don't know where to send them." For this reason, I plan to meet with each pediatrician in the area personally and invite them to share information about InfantSEE® with their patients' parents.

Additional challenges to infant eye care occur during the examination itself, as previously described. With children, attention span is very limited, so the examiner must be lively and have confidence in their findings so they can quickly move on. This takes practice, and it takes energy—something I learned while performing school screenings as part of my clinical education. The best way for me to grab a child's attention was using bright, noisy targets that kept the children fixated while I could examine them.

Another important tool to help combat the difficult infant is proper scheduling. I can attest to how important nap times are because infants will only be cooperative if they are happy and well-fed. Parents know their child best, so it will be necessary for my staff and me to work with them to schedule the examination appropriately.

I look forward to providing excellent ocular care through the InfantSEE® program. Though it may be challenging at times, the reward of providing a free service that could drastically change a child's life is worth it to me. My son has benefited from his own early vision examinations, and I know that I can help others benefit as well. I will soon be performing my very first InfantSEE® examination on someone very special to me—my very own daughter, who was born in September of this year. I'm very happy now to be a father of two wonderful children, and I hope for their continued health throughout life. My experiences with them will serve me greatly as a future provider in the InfantSEE® program.

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