POOL BALLS PATIENT VISION THERAPY RECORD FORM

PATIENT NAME:_____

DOCTOR NAME:_____

THERAPIST NAME:_____

VAC
Vision
Assessment
Corporation

PATIENT INSTRUCTIONS:
PATIENT IS TO USE VECTOGRAPH_____DAYS/WEEK, _____TIMES/DAY, _____MIN/TIME

Relaxing (Divergence) - *Letters on blue bar*
Crossing (Convergence) - *Numbers on blue bar*

Record the Breaking Point above the diagonal line and the Recovery Point below the diagonal line.
Breaking Point: The point at which the Ball images separate into two images (double image)
Recovery Point: The point at which the separated images are seen as a single clear image again

DATE	4/1/2018						
RELAXING	F / E						
CROSSING	6 / 5						

DATE							
RELAXING							
CROSSING							

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CROSSING							

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