

## INSTRUCTIONS

Thank you for purchasing the Vision Assessment Corporation PASS Test 3,+  
Pediatric Assessment of Stereopsis with a Smile, P/N 1013+.





### PURPOSE

This depth perception test is designed for quantitative assessment of stereopsis in children and non-readers to check how well a child's two eyes work together.

### FAMILIARIZE YOURSELF WITH THE TEST

Test includes:

- 6 Cards:
  - ❖ Card **A** = DEMO
  - ❖ Card **B** = 480 seconds of arc
  - ❖ Card **C** = 240 seconds of arc
  - ❖ Card **D** = 120 seconds of arc
  - ❖ Card **E** = 60 seconds of arc
  - ❖ Card **F** = 40 seconds of arc
  - ❖ Card **G** = 30 seconds of arc
  - ❖ **BLANK** Card
- 1 Pair Small Pediatric Polarized Viewers  
 (NOT TO BE USED AS SUNGLASSES)
- 1 Pair Medium Pediatric Polarized Viewers  
 (NOT TO BE USED AS SUNGLASSES)
- 1 Carrying Case
- 1 Instruction Manual

Suggested Helpful Tools (NOT INCLUDED):

- Lamp (available from most ophthalmic distributors)
- Small Hand-held Mirror

### TESTING CONDITIONS

1. Arrange the child's chair so that the cards are 40 cm from their eyes.
2. Choose a well-lit, glare-free area to ensure that no reflections or extraneous glare can be seen on the cards.
3. Inspect the cards to ensure that they are clean and free of smudges. Clean if necessary. Refer to "CARE/HANDLING" section at the end of this manual.

### ADMINISTERING THE TEST


1. Select the appropriate size Polarized Viewers and place them on the child. (A small hand-held mirror can be used for the child to admire themselves so that they become comfortable wearing the "Magic" Viewers.)  
*PLEASE NOTE: IF THE CHILD WEARS PRESCRIPTION GLASSES, THE POLARIZED VIEWERS SHOULD ALWAYS BE WORN OVER THEIR NEAR CORRECTION.*
2. The back of each card is labeled. Begin with Card **A** (DEMO Card). This card has a 2-dimensional Smile Face and is used for training purposes to determine task understanding.
3. Ask the child to point to or identify the Smile Face on Card **A**.
4. Next, hold Card **A** and the **BLANK** Card side by side in front of the child at a 10 degree angle (top of card tilted back towards the examiner) or place the cards on the lamp stand if available.  
*PLEASE NOTE: ALWAYS ENSURE THAT THE ARROW ON THE BACK OF EACH CARD IS POINTING UP. ALWAYS HOLD THE BLANK CARD AT EXACTLY THE SAME DISTANCE FROM THE CHILD AS THE OTHER CARD.*
5. Hold the cards close to or touching each other without overlapping so both cards are in the child's line of sight, and ask the child to point to the Smile Face.
6. Shuffle the cards behind your back so as to randomly change the position of the Smile Face, and then present it randomly either to the right or left of the **BLANK** Card.  
*PLEASE NOTE: AVOID CREATING A PATTERN OF PRESENTATION (i.e. R, L, R, L or R, R, L, L).*
7. Repeat steps 4-6 a maximum of 5 times. The child is successful if they are able to identify the card with the Smile Face 4 of 4 or 4 of 5 presentations. The child is unsuccessful if they answer incorrectly 2 times out of a maximum of 5 presentations.
8. If the child unsuccessful on Card **A** (DEMO), STOP testing and record the child's results as "Unable."
9. If the child is successful on Card **A** they are "able" to understand the test. Proceed by replacing Card **A** with Card **B**.
10. Repeat the same procedure (steps 4-7) again now with Card **B** and the **BLANK** Card.  
*PLEASE NOTE: IT MAY TAKE A FEW SECONDS FOR THE CHILD TO SEE THE SMILE FACE. SUGGEST THAT THE SMILE FACE IS HIDING, AND ENCOURAGE THE CHILD TO CONTINUE LOOKING FOR IT.*
11. If the child is unsuccessful on Card **B**, STOP testing and record the child's results as "Card **A**" (the last card with 4 correct).
12. If the child is successful on Card **B**, replace Card **B** with Card **D** (initially skipping Card **C**), and repeat the same procedure (steps 4-7) again now with Card **D** and the **BLANK** Card.
13. If the child is successful on Card **D**, proceed to step 16.

14. If the child is unsuccessful on Card **D**, replace Card **D** with Card **C**, and repeat the same procedure (steps 4-7) again now with Card **C** and the **BLANK** Card.
15. If the child is unsuccessful on Card **C**, STOP testing and record the results as “Card **B**” (the last card with 4 correct). If the child is successful on Card **C**, STOP testing and record the results as “Card **C**.”
16. If the child is successful on Card **D** replace Card **D** with Card **E** and repeat the same procedure (steps 4-7) again now with Card **E** and the **BLANK** Card.
17. If the child is unsuccessful on Card **E**, STOP testing and record the results as Card **D**. If the child is successful on Card **E**, replace Card **E** with Card **F** and repeat the same procedure (steps 4-7) again now with Card **F** and the **BLANK** Card.
18. If the child is unsuccessful on Card **F**, STOP testing and record the results as “Card **F**” (the last card with 4 correct).
19. If the child is successful on Card **F** replace Card **F** with Card **G** and repeat the same procedure (steps 4-7) again now with Card **G** and the **BLANK** Card.

#### **RECORDING THE RESULTS**

- Record “Refused Glasses” if the child will not wear the Polarized Viewers.
- Record “Unable” if the child is unable to point to the Smile Face in Card **A** (DEMO Card).
- Record the card for the last presentation with 4-6 correct responses (i.e. “Card **B**,” “Card **C**,” “Card **D**,” “Card **E**,” “Card **F**” or “Card **G**”).

#### **CARE/HANDLING & STORAGE**

- Clean cards with a soft, damp, lint-free cloth. Dampen cloth using glass cleaner or mild detergent/water.
- **CAUTION: DO NOT IMMERSE THE CARDS IN WATER. DO NOT SPRAY CLEANER DIRECTLY ONTO CARDS.**
-  Store cards and Polarized Viewers in the provided carrying case in a dry place away from direct sunlight.
- Clean Polarized Viewers using lens cleaner and soft, lint-free cloth.

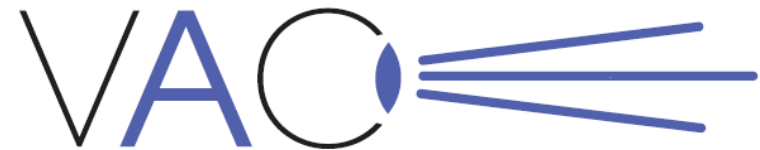
#### **WARRANTY**

- 1 year manufacturer warranty from date of purchase.

**Notice to User/Patient:** *Any serious incident that has occurred in relation to this device should be reported to the manufacturer and to the competent authority of the Member State in which the user and/or patient is established.*

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Vision  
**Assessment**  
Corporation

# **PASS Test 3+**

## **Pediatric Assessment of Stereopsis with a Smile**

**P/N 1013+  
INSTRUCTIONS**

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