**HOSPITAL or PROVIDER NAME/LOGO**

Hospital/provider address

Department of Orthoptics – Vision Screening Service

Contact details: phone number

11 July 2023 [date in this format]

Dear Parent/Carer of child’s name

**Information following vision screening**

We contacted you recently about vision screening for 4 to 5 year-old children. Your child recently had the screening test and we are informing you of the result.

**Test completed on:** date [in above format]

**Test completed at:** name of school

**Vision screening outcome:** we did not find a problem with your child’s vision (no reduced vision suggested by the test).

**Your child’s result**

This means that, at the moment, your child’s vision in both eyes is as expected for their age. This result does not rule out future eye problems. Children’s eyes change as they grow, so if you have any concerns about your child’s eyes at any stage in the future, contact your local optometrist (optician) or GP. Optician sight tests are free under the NHS for children under the age of 16.

**More information**

If you would like further information, please call the vision screening service on phone number.

For further information visit [www.nhs.uk/childrens-eyes](http://www.nhs.uk/childrens-eyes)