## **Referral Process for NMSBVI Low Vision Clinic Evaluation**

## **Plan Ahead**

Ideally, we ask that the completed registration paperwork be received by the Low Vision Clinic Coordinator <u>four weeks prior</u> to the clinic date. If that timeline is not possible, please contact the Low Vision Clinic Coordinator to discuss your needs to alter the referral schedule.

An initial clinical Low Vision evaluation usually takes about one and a half hours with the Low Vision doctor. Most students will then spend additional time with other clinic team members to do further follow-up with recommended optical devices, assistive technology, etc. The total time each student spends at the clinic varies by individual need. A typical appointment will last 1 ½ hours. Scheduling is usually done on a first come, first served basis as the completed forms are returned to the Low Vision Clinic office.

## **Complete and Submit**

The teacher for students with visual impairments (TVI) or the certified orientation and mobility specialist (COMS) typically initiates the referral to a Low Vision Clinic and serves as the contact person for the student's educational team throughout the referral process. If a student has been identified as having a visual impairment, but is not receiving the services of a TVI or COMS, then another member of the educational team may initiate the referral process.

Print the Low Vision Clinic referral forms provided here, or contact the LVC Coordinator if you prefer having a printed packet of forms or individual forms mailed or faxed to you, or an electronic format emailed to you.

Form #1, the TVI Checklist, is provided to assist you with the referral process and does not need to be returned to the LVC Coordinator. Complete and return forms #2, 3, 4, 5, and 6 for each student you want to schedule. Contact the LVC Coordinator if Spanish forms are needed.

**1. TVI Checklist**: <u>Please note the student information that we request in</u> <u>addition to the forms included here</u>. This is a worksheet for your use and not intended to be returned to the LVC Coordinator.

**2. Parent/Caregiver Pre-Exam Information**: Most TVI's collect this form back from the parent/guardian and then return all completed forms to the LVC Coordinator in one mailing. However, if it is more convenient to have the parent return the form directly to the coordinator, that is fine.

**3. TVI Pre-Exam Information**: Contact the LVC Coordinator if there are any questions.

**4. Student Pre-Exam Information**: Use only for students as you think appropriate, depending on age, etc. This is intended to be completed by or with the student in their words.

**5. Consent to evaluate/Release of information form**: At least one consent form should be completed, signed and returned. Summary reports of the LVC evaluation will be sent to the parents and the TVI/COMS. If the parent wants additional individuals/agencies to receive copies of the report, then a separate form will need to be filled out for each party as an authorization to release information.

**6. Photo Consent form**: Occasionally, we may wish to photograph some of the Low Vision Clinic students during segments of their evaluation, for use in media presentations for public/educational awareness and promotion of our program. This is totally optional.

If you have any questions, or need further information or assistance with the referral process, please contact:

Kimber Kniffin Low Vision Clinic Administrative Assistant Office: 505-271-3067 Fax: 505-271-3073 KimberKniffin@nmsbvi.k12.nm.us

Valerie Tiensvold Coordinator of NMSBVI Access to Learning Low Vision Services Cell: 505-859-0430 Fax: 505-271-3073 vtiensvold@nmsbvi.k12.nm.us