



FREE Kids Vision Screening from South Dakota Lions KidSight



Why This Screening Matters

Young children often cannot describe what they see, and many early vision problems have no obvious symptoms. Issues can develop *between* yearly well-child exams, and early detection is key to preventing learning delays and behavior challenges.

How This Screening Complements Your Child’s Well-Child Exam

During a well-child visit, doctors perform a general vision check. However, these checks can be limited because toddlers can’t read an eye chart or reliably respond to vision tests. Many clinics also do not use specialized pediatric screening equipment.

Our Lions KidSight device fills this gap by using a pediatric vision camera that measures the eyes objectively, without needing your child to say or do anything. It can detect early signs of nearsightedness, farsightedness, astigmatism, eye alignment issues, and risk factors for amblyopia (“lazy eye”) — often before these concerns are visible in a routine exam.

This screening does **not** replace a full eye exam, but it provides an important early warning system during the years when vision problems are easiest to treat. If your child’s screening shows that a full eye exam is needed, the SD Lions have financial assistance programs available to help cover the cost if financial barriers would prevent you from getting care.

What to Expect

The screening is quick, painless, and non-contact, with no eye drops needed. Your child’s results are available right away, and the service is completely free for all families.

VISION SCREENING CONSENT FORM

Fill out one section for each child being screened.

Child’s Name: _____ Date of Birth: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female	Child’s Name: _____ Date of Birth: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female
Child’s Name: _____ Date of Birth: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female	Child’s Name: _____ Date of Birth: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female

Consent Information

This screening is preliminary and does not replace a full eye exam or provide a diagnosis. Screening information may be shared with partners involved in the screening (school nurse, Head Start, daycare provider, SD Lions Foundation, etc.) and will be kept private and on file by the SD Lions Foundation. You will receive results only if your child is recommended for a full eye exam, and you are responsible for arranging that exam if your child is referred. You may be contacted by phone or email if your child does not pass the screening. You agree not to hold the SD Lions Foundation responsible for errors of commission, omission, or misdiagnosis.

Parent/Guardian Signature: _____

Parent/Guardian contact information (email or phone): _____

Date: _____