

Patient's Name: _____

Exam Date: _____

VSP COMPUTER VISION QUESTIONNAIRE

Please complete and bring this form to your appointment if you are a VSP patient and would like to get a separate VSP computer eye exam with a \$0-\$25 copay pending on your VSP plan.

1. Which digital devices do you use daily or almost daily? (mark all that apply):

- Smartphone
- Laptop
- Tablet
- Desktop with Monitor

2. Which of the above digital devices do you use the most AND second most?

Most: _____ Second Most: _____

3. How many hours per day do you use/view digital devices in total? _____ hours

4. What kind of lighting do you have in your primary work area?

- Overhead light
- Task/desk light
- Fluorescent light
- Natural light

5. Are you experiencing any of the following symptoms while on your digital device(s)?

- Headaches
- Sore or tired eyes (eye strain)
- Blurred near vision
- Glare (light) sensitivity
- Blurred distant vision
- Dry or watery eyes
- Burning, itching or red eyes
- Back pain
- Neck and shoulder pain
- Double vision

6. Do you wear glasses while working on your digital device(s)? Yes / No

(If yes, please bring them with you to your eye exam)

7. Do you wear contact lenses while working on your digital device(s)? Yes / No

(If yes, please bring them with you to your eye exam)

8. What is your viewing distance from eye to computer screen? _____ inches

9. What is your viewing distance from eye to keyboard? _____ inches

10. What is your viewing distance from eye to reference material if applicable? _____ inches

11. The center of the computer screen is: (circle one)

Above Equal to Below eye level

12. If the computer screen is above or below eye level, by how many inches? _____ inches

13. Do you use reference material while working at the computer? Yes / No

a. If yes, what percentage of time? _____%

b. If yes, where is your reference material typically located? (circle one)

Above Equal To Below Eye Level

c. If the reference material is above or below eye level, by how many inches? _____ inches