

Online Visual Acuity Instructions

1. Email the “Visual Acuity Chart - Online” pdf file to your patient, and have the patient open the file on their preferred digital device. Alternatively, if you are using a platform that allows screen sharing, you may be able to share the VA chart with the patient.
 - a. A phone will work, and the range will still be quite useable, from approximately 20/5 to 20/900, depending on viewing distance and screen size.
 - b. If a hand-held device is used to view the chart, have the patient hold it in “landscape” mode.
 - c. It does not matter whether the pdf file is opened in Acrobat Reader or a browser.
2. During the virtual visit, have the patient measure the length of the arrow on the first page of the visual acuity document. If the patient has nothing to measure it with, here are some ways they can approximate it:
 - a. A credit card measures 2.1 inches by 3.4 inches.
 - b. U.S. currency bills measure 2.6 inches by 6.1 inches
 - c. A standard piece of paper measures 8.5 inches by 11 inches.
3. Have the patient measure the distance from their eyes to the screen on which they are viewing the visual acuity chart. If this is difficult or not possible, this too can be approximated:
 - a. Have your patient reach out with a totally outstretched arm to just barely touch the screen of their device with the tip of their finger. For a person of small stature (about 5’, 0” tall), this is usually about 22 inches and for a very tall person (6’, 6” tall) this will typically be about 34 inches. Use the height of the patient to interpolate an approximate viewing distance between these two values.
 - b. The length of a standard piece of paper might be helpful in measuring this distance.
4. Enter the arrow length and test distance (both in inches) in the yellow cells of the “Visual Acuity Calculations - Online” Excel sheet. Each line of the visual acuity chart will then populate with the correct Snellen equivalent values. These Snellen denominators will be somewhat different from the values you normally see on a visual acuity chart.
5. Test visual acuity as you normally would. A normally sighted patient may be able to begin on the last page, whereas a low vision patient may need to begin with the first page.
 - a. It’s always a good idea to remind the patient to remain at the originally determined test distance from the chart and to not bring their screen closer or lean forward. Multiple reminders about this are a good idea.
 - b. If the patient is using a computer, recommend that they go down the chart using the “Page Down” button rather than the arrow, although the down arrow will also work.
6. Technical notes: This visual acuity chart uses Sloan optotypes with spacing, where applicable, of one optotype. The chart progresses in 0.1 logMAR steps. ETDRS principles are followed, or at least approximated, for the last two pages. The red and green lines were added to the last page to aid in navigation when the clinician is communicating with the patient.

I hope you find this helpful.

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