

VISION REPORT

Examination MUST have been completed within 12 months of application.

NAME C	OF APPLICANT	SURNAME		GIVEN NAMES			INITIAL			
ADDRESS OF	APPLICANT									
			T	1		DATE	FDIDTU			
CITY			PROVINCE	POSTAL CODE		DATE OI	MM	D D		
VISION STANDARDS FOR POLICE OFFICER APPLICANTS										
OPTOMETRIST / NAME OF OPTOMETRIST/OPHTHALMOLOGIST OPHTHALMOLOGIST						DATE OF EXAMINATION YYYY M M D D				
	OPTOMETRIST / OPHTHALMOLOGIST									
ADDITEGO OF	or rome more or minemore or or									
						TELEPHO	ONE NUMBER			
UNCORRECTED VISUAL ACUITY - NORMAL							APPLICANT STANDARD			
At least 20/40 (6/12) with both eyes open						□ YES □ NO				
FARSIGHTEDNESS - NORMAL						APPLICANT STANDARD				
Not greater than +2.00 D, spheroequivalent in the least hyperopic eye						□ YES □ NO				
BEST CORRECTED VISUAL ACUITY - NORMAL						APPLICANT STANDARD				
At least 20/20 (6/6) with both eyes open						□ YES □ NO				
COLOUR VISION - NORMAL						APPLICANT STANDARD				
Pass Ishihara (Book or Titmus) without any colour corrective (e.g. X-Chrom, Chromagen) lenses					"	□ YES □ NO				
NOTE:	Farnsworth Vision Test – is recommended for unsuccessful Ishihara Tests						APPLICANT STANDARD			
	Pass Farnsworth D-15 wit Chromagen) lenses	thout any col	lour corrective	(e.g. X-Chrom,	_ ·	YES	□ NO			
LATERAL PHORIA FAR – NORMAL						APPLICANT STANDARD				
	No more than 5 eso or 5 e	exo			- '	YES	□ NO			
If No – please provide additional information, which documents that the person is unlikely to experience double vision when fatigued or functioning in reduced visual environments										
LATERAL PHORIA NEAR – NORMAL						APPLICANT STANDARD				
No more than 6 eso or 10 exo						□ YES □ NO				
	If No – please provide additional information, which documents that the person is unlikely to experience double vision when fatigued or functioning in reduced visual environments							nce		

PERIPH	ERAL VISION	APPLICANT STANDARD							
	Peripheral visual field limits similar angular size with responder no less than the limits given addition, no blind spots sliphysiological blind spot. Lim	□ YES	□ NO						
	 Temporal (0º meridian) 75º Superior-temporal (45º meri Superior (90º meridian) 35º Superior-nasal (135º meridian) 								
OCULA	R DISEASE - NORMAL	APPLICANT STANDARD							
	Free from diseases that impostandards above, or will procusual system.	□ YES	□ NO						
CORRE	CTIVE SURGERY	HAVE YOU EVER HAD CORRECTIVE SURGERY?	□ YES	□ NO					
PROC	EDURE TYPE – <i>Pl</i> ease indicate	DATE OF	PROCEDURE M M	D D					
	Corneal Refractive Surgery								
	Pseudophakic Intra-Ocular Lenses		wed; however, the candidate must meet additional requirements and must provide specific imentation on Alberta Police Recruit Selection Standards approved forms						
	Phakic Intra-Ocular Lens Implants (Piol)	Certain designs are allowed; however, the candidate must meet additional requirements and must provide specific documentation on vision stability and night vision using the Alberta Police Recruit Selection Standards approved forms							
	Orthokeratology, Corneal Transplants, and Intra- Stromalcorneal Rings	Not allowed.							
NIGHT V	/ISION – Only required if an A	Applicant had Corrective Surgery	APPLICANT STANDARD						
	Obtain minimum scores on a done binocularly with, or wit	□ YES	□ NO						
	 Bailey-Lovie Low Contrast logMAR 								
	 Bailey-Lovie High Contras logMAR 								
	 Bailey-Lovie Low Contrast logMAR 	Acuity in Dim Illumination: minimum acuity of 0.58							
SIGNATURE (OF DOCTOR	DATE	мм	DD					
			YYYY	IVI IVI	00				
SIGNATURE OF APPLICANT				мм	DD				

Note: All vision test results <u>will be</u> verified by a Pre-Employment Occupational Health and Safety Medical prior to employment.