

Orthoptic Department

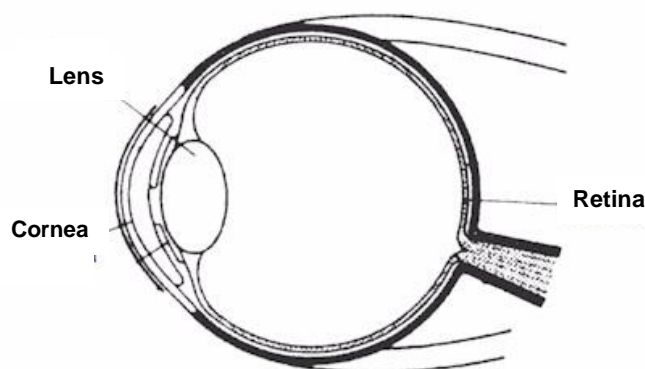
Wearing an eye patch at school or nursery

Advice for teachers and carers

How do we see?

The images we see are made from signals sent from the eyes to the brain.

What is the normal structure of the eye?



The eye is made of three parts.

- A light focusing part at the front (cornea and lens).
- A light sensitive film at the back of the eye (retina.)
- A large collection of communication wires to the brain (optic nerve).



Why does my child need to be patched?

Patching may be used when a child has one eye that is “lazy”. This may be because there is a large difference in the glasses prescription between the two eyes, or a squint. This is sometimes referred to as amblyopia. The good eye is patched to encourage the weaker eye to work harder.

How does this affect the way my child sees?

When the patch is worn, your child is forced to use their lazy eye and this may result in visual problems during the time that the patch is on. Vision in the lazy eye may be severely reduced, so it may be difficult for your child to see.

Patching will only work when the child is young enough to be developing vision, usually before 7/8 years of age, so it is important that this treatment is carried out as early as possible.

What can be done to help?

It is very important that the “lazy” eye is stimulated in order to improve the vision. It is recommended that whilst the patch is worn, your child should do lots of close work e.g. drawing, reading, playing with toys at close range, schoolwork etc.

Your child does not usually need larger print than normal, as this will stop the vision from improving as quickly. However, initially they may struggle to see their work, and this may cause frustration or distress.

How can parents, family, friends and teachers make a difference?

1. **Ensure that your child wears their patch** for the prescribed length of time every day.
2. If vision is severely reduced, your child may be unsure or distressed. **Help your child to find their way around** by giving extra support.
3. **Encourage and reassure** your child when the patch is on, as they may find tasks difficult when using the weaker eye.
4. **Let your child sit at the front of the group** and let them move nearer to the board if they are having temporary difficulty.
5. **Allow extra time** for them to complete tasks/school work.

Patient Information

6. Teachers should **be tolerant** of untidy presentation of work/writing or a dip in general performance particularly at the start of patching treatment.
7. Be aware that your child's **field of vision** (peripheral vision) may be reduced on the side of the patch and that they may bump into objects when wearing their patch

At the beginning of treatment they may need extra supervision around steps and stairs, and in the playground. If vision is severely reduced you may be advised not to put the patch on for outdoor play.

Additional information

Date.....

Your child was tested today and found to have a lazy.....eye.

Please patch theeye forhours each day.

The Trust has access to interpreting and translation services. If you need this Information in another language or format please contact 024 7696 6521 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

Document History

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