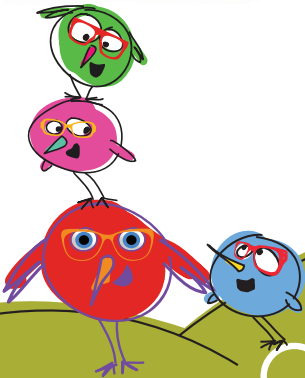




# PARENT BROCHURE



dilli dali  
eyewear



## Thank you for purchasing Dilli Dalli with IntelliFlex™ Soft Touch!

Dilli Dalli eyewear delivers safety, durability, and comfort in an affordable collection parents and eyecare professionals alike have come to trust. We spent months consulting with pediatric eyecare professionals and parents while we developed the Dilli Dalli collection, so that we could provide the best possible product for your little one.

Our commitment to providing a positive experience for both parents and little patients alike is what sets Dilli Dalli apart from other collections.

### A little bit about your Dilli Dalli with IntelliFlex Soft Touch frames:

- They're highly flexible, durable, hypoallergenic & recyclable
- We've designed them so they are comfortable and easily adjustable for little ones
- They were designed and built using 3D printing technology

### What are they made from?

Dilli Dalli with IntelliFlex Soft Touch frames are made with a proprietary, specially designed material that meets all CPSIA and Prop 65 standards for children's products.

### What is unique about the design?

Dilli Dalli with IntelliFlex Soft Touch is a one piece design that incorporates IntelliFlex hinge technology. This multi action, flexible temple design acts like a spring hinge, and has no separate or moving parts and no screws. This means there are no sharp edges or hinges that may pinch or scratch a very young child.

Adjustable breakaway safety straps, available in two sizes, hold the frames comfortably in place. Ask your eyecare professional for additional safety straps, if necessary. Additionally, we have ear locks (also known as stay puts) available if your child does not want to wear the strap. Ask your eyecare professional if this is a viable alternative based on your child's needs.



Learning that your child needs glasses can be an emotional and overwhelming experience! Sometimes it's difficult to remember everything that you've learned and what's been explained, so we've created this reference booklet with some tips and helpful information.

Remember: when it comes to your child's vision health, we encourage you to always speak to your eyecare professional with questions and concerns.

**Here are some questions you may wish to ask during each visit:**

- What is the name of my child's vision problem?
- When should we make another appointment?
- Is there anything to watch out for in between appointments?
- Should I call when I see something unusual?
- Will my child need glasses for the rest of his/her life?
- How and when should my child wear the glasses?
- Will the strength of the prescription continue to increase?
- Will eyeglasses, like medicines, make my child's eyes "better?"
- Is there any vision therapy that may help my child?




**Vision issues are relatively common in young children. Unfortunately, children who can't see well usually do not know they are not seeing "normally." They think everybody sees as they do.**

### **Signs of visual problems may include:**

- Eyes not lining up
- Eyes moving quickly back and forth
- Eyes not tracking moving objects
- Squinting or tilting of the head
- Sitting too close to the television
- Holding an electronic device, (e.g. SmartPhone, tablet) too close to their eyes
- Bumping into objects often

### **Basic definitions of eye conditions:**

There are 5 basic types of refractive errors:

- Myopia (nearsightedness) – This is a where the distance vision is blurred but the child can see clearly up close. This occurs most often in school-age children, often detected by a pediatrician or school nurse. Of course, this condition occasionally may occur in infants and younger children. If your child is of school age, you may wish to have him or her sit closer to the front of the classroom. Ask your doctor if this is a viable alternative.
  - Hyperopia (farsightedness) – Most children are born slightly farsighted (this is normal!) and may not require glasses. Your doctor will advise. When there is an excessive amount of farsightedness, the eye may not be able to properly focus. Glasses may be required to correct blurry vision, crossing of the eyes, or visual discomfort.
  - Astigmatism – This is when the surface of the cornea is shaped more like a football than round like a basketball. Doctors with examining equipment can detect this condition. The lenses that are prescribed will have different strengths in different parts of the lens.
  - Anisometropia – This is when one eye is very different in strength than the other.
  - Amblyopia – This is when the vision in one eye may not develop normally. Sometimes called a "lazy eye," this must be treated at a very young age so that the weaker eye will not be permanently impaired. Glasses, patching, bifocals or prism lenses may be recommended.
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## How can I get my child to keep his/her glasses on?

1. **Stay consistent.** When the glasses come off, put them back on.
2. **Stay positive.** Put on a smile and set the glasses quietly back on his or her face. Again.
3. **Distract him or her.** As soon as the glasses go on, try to find something fun in hopes that they'll forget they are wearing them.
4. When the child is stirring before really awakening from sleep or a nap, place the glasses on your child so that they will be accepting naturally the feeling of wearing the glasses.

**The key to success is a positive attitude. Help your child realize that his or her glasses will help make them see much better!**

### Sources:

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