

A Waggoner evaluation of color vision deficiencies

Doctor's Name/ Clinic: _____

Patient Name: _____ age: _____ date: _____

Pediatric - CVTME

Daylight / 6500K

Standard Room Illumination

Test

Test conditions

| Plate | Demo | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | |
|----------------------|------|----|----|----|----|----|----|----|-----|----|---------------|
| Pass | ☆○□ | ○□ | ☆○ | ○□ | ○□ | ○□ | ○□ | ○□ | ☆○□ | ☆○ | |
| Correct ✓ Wrong ✗ | Demo | | | | | | | | | | total correct |

Scoring

| Normal/Color Deficient | Scoring |
|--|--|
| Normal Color Vision | Missed 1 or less on plate 1-9 |
| Color Vision Deficient | Missed 2 or more on plate 1-9 |
| Optional for young disabled individuals: Color Deficient | *Miss two or more O on plates 1-9. Other symbols are ignored |

*Please review in-depth instructions in CVTME

Results

Normal color vision

Red - Green color deficiency - Protan or Deutan