

AOA Advocacy Tool Kit

**Children's Comprehensive Eye Exam
Legislation**

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For more information, please contact
Daniel Carey
Director of State Government Relations
Dcarey@aoa.org
American Optometric Association

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Introduction & Overview

As America's family eye doctors, doctors of optometry know the importance of ensuring all children receive proper eye and vision care. Annual comprehensive eye exams for children, beginning as early as six months old, can make the difference in whether a child achieves his or her full potential inside and outside the classroom.

A growing number of states are considering legislation that would require all children to have a comprehensive eye exam before entering 1st grade. The AOA strongly supports these efforts, which help make certain that children begin their academic experience with healthy eyes and good vision.

Doctors of optometry can play a critical role in urging lawmakers across the country to support children's eye exam legislation and pass these proposals into law. By contacting lawmakers, writing to their local newspaper, explaining the benefits of comprehensive eye exams to parents and teachers, and participating in other advocacy efforts, optometrists can help to ensure America's children start school with good eye and vision health.

This toolkit is intended to assist optometrists with their advocacy efforts. As we explain below, some of these materials are intended for distribution to lawmakers, the media and other key audiences, while other materials are for advocates' use only. In all cases, advocates are encouraged to modify the materials as needed, particularly to reflect aspects of the legislation that are unique to their state. Questions should be directed to Daniel Carey, AOA's Director of State Government Relations, at Dcarey@aoa.org.

This toolkit includes the following materials:

- **Talking Points and Fact Sheet** (for public distribution)
- **Template Letter to Lawmakers** (to be personalized by advocates)
- **Template Op-Ed for Publication in State/Local Media** (to be personalized by advocates)
- **Template Letter to the Editor for State/Local Media** (to be personalized by advocates)
- **Q&A for Advocates** (not for public distribution)

Note all materials include a title, highlighted in **green**, which should be removed from any versions shared with outside audiences. Many of the materials include text highlighted in **yellow** that is intended for advocates to fill in.

Talking Points and Fact Sheet (for public distribution)

All Children Entering School Should Receive a Comprehensive Eye Exam

All children should receive a comprehensive eye exam before starting school.

- An estimated 1 in 5 children has a vision problem, which can interfere with normal development, school performance, social interactions and self-esteem.
- Vision disorders that occur in childhood may manifest as problems well into adulthood, affecting an individual's level of education, employment opportunities and social wellbeing.
- Research reported in AOA's evidence-based pediatric guideline, updated in 2017, shows preschool-age children should receive a comprehensive eye exam during their first year of life, between the ages of three and five, before entering 1st grade and annually thereafter.

School-based screenings are inadequate for detecting most eye and vision problems.

- Traditional vision "screenings" tend to focus on distance visual acuity (VA) – but they do not measure how well the eyes focus up-close, work together or move efficiently – skills necessary for academic achievement.
- Routine school screenings provide less than 4 percent of the eye tests needed to help children see and they miss up to 75 percent of children with vision problems.
- When a problem **IS** found, most children do not receive necessary treatment – one study found 61% of public school children who failed a screening do not receive follow-up care.
- 73% of children with eye and vision problems will pass a traditional vision screening for amblyopia, or lazy eye.

Comprehensive eye exams are the highest standard of care in clinical vision care for children.

- The National Academies of Science, Engineering and Medicine vision report underscores that comprehensive eye exams are *"the gold standard in clinical vision care to most accurately identify and diagnose eye and vision problems."*
- Children who do not receive access to comprehensive vision care from an eye doctor are more likely to be treated for ADHD or have an individualized education plan (IEP).
- While screenings may identify some children at risk for vision problems, a comprehensive eye exam is necessary for definitive diagnosis and appropriate treatment.

States requiring comprehensive eye exams improve children’s eye health and reduce healthcare costs.

- States including Illinois, Kentucky and Nebraska have implemented essential programs requiring comprehensive eye examinations for children, and many more states are considering similar programs.
- A seven-year progress report in Kentucky found that under the comprehensive eye exam requirement, 13 percent of children required vision correction for a previously undiagnosed condition, 3.4 percent were diagnosed with amblyopia or lazy eye, and 2.3 percent were found to have strabismus (crossed or turned eye).
- Kentucky has not borne any additional financial burden by implementing this program.
- In Nebraska, which requires comprehensive eye exams for kids entering school, an estimated 1 out of every 8 students had an eye problem that would not have been detected during a school-based screening.
- The national economic burden of vision problems for children age 17 and younger has been estimated at \$5.7 billion annually.
- Based on an ADHD prevalence rate of 5.29%, the AOA estimates comprehensive eye exams could reduce national Medicaid and CHIP spending by \$498 million annually.
 - *Customization recommendation: Use the prevalence rate and state numbers to estimate the state monetary impact.*

Please support a comprehensive eye exam requirement for children entering 1st grade in our state.

Elevator Speech for Advocates (not for public distribution)

As a practicing doctor of optometry and member of the [State Optometric Association], I am committed to ensuring our children receive early and thorough vision care that will enable them to reach their fullest potential. A child's eyes go through rapid changes during the first six years of life – a time when routine eye exams are critical to ensuring good vision health for academic and life success – which is why I'm urging the [State] legislature to [introduce/pass] legislation to require children have a comprehensive eye examination before first grade.

While many children receive vision screenings in school or a primary care setting, those screenings are inadequate to detect a range of serious eye and vision problems. Routine school screenings provide less than four percent of the eye tests needed to ensure children have good eye and vision health. Of the children that are found to have eye problems through screenings, 61 percent never visit the doctor for necessary follow-up help.

However, comprehensive eye examinations administered by an eye doctor, such as a doctor of optometry, include tests to determine nearsightedness, farsightedness, amblyopia – commonly known as a lazy eye – astigmatism, eye coordination, eye muscle function and focusing abilities.

Comprehensive eye exams are the highest standard of care for assessing a patient's eye and vision health. Lawmakers must prioritize legislation to ensure all children receive a such an exam as they begin their school years.

Our children deserve the brightest of futures. The sooner eye problems are identified and addressed, the better the outcomes in childhood and beyond, and for society as a whole.

Template Letter to Lawmakers

[Insert Date]

Senator/Representative _____

Office Address

City, State, Zip

Dear Senator/Representative _____,

As a practicing doctor of optometry and member of the [State Optometric Association], I am committed to ensuring our children receive early and thorough vision care that will enable them to reach their fullest potential. A child's eyes go through many changes as they develop, and it's critical the vision care they receive aids in the development of good eyesight. I'm asking for your support for [bill number, if applicable], legislation that would ensure comprehensive eye examinations for all children entering our state's public school system.

Children with eye or vision problems may be limited in their ability to participate in sports, learn in school, and observe the world around them. These students can easily fall behind their peers. In fact, one in five children has vision problems, and by the time they enter school, 25 percent of those children need or wear corrective glasses. The research supporting the American Optometric Association's evidence-based guideline for pediatric eye and vision exams, updated in 2017, underscores that preschool-age children should receive a comprehensive eye exam during their first year of life, between the ages of three and five, before entering 1st grade and annually thereafter.

School-based vision screenings remain inadequate in detecting many serious eye and vision problems. Parents of children who "pass" a screening are often given a false sense their child's eyes are healthy, when they may have a serious, undiagnosed eye or visual condition. Routine school screenings provide less than four percent of the eye tests needed to help children see, and of the children who are found to have eye problems through screening, 61 percent never visit the doctor for help.

Comprehensive eye exams administered by an eye doctor, such as a doctor of optometry, include tests to determine nearsightedness, farsightedness, amblyopia (lazy eye), astigmatism, eye coordination, eye muscle function, focusing abilities and other conditions. In states that currently require comprehensive eye exams, including Kentucky, Illinois and Nebraska, these laws are contributing to early intervention for vision problems, diseases and disorders that if diagnosed early can be treated before irreversible damage is done. In Nebraska, which now requires comprehensive eye exams for kids entering school, an estimated 1 out of every 8

students had an eye problem that would not have been detected during a school-based screening.

And they are potentially alleviating the overall cost of undiagnosed vision problems, estimated at \$5.8 billion. Because of the potential impact, many more states are considering similar programs.

As eye care providers, doctors of optometry throughout [State] stand ready to support your efforts to ensure children receive the best vision care. I would be happy to discuss this issue further.

Sincerely,

[Insert Name, address, phone number]

Template Op-Ed for Publication in State/Local Media

Title: Protecting Our Children's Vision

Parents may not know that their child's eyes go through rapid changes during the first six years of life – a time when routine comprehensive eye exams are critical to ensuring good vision health throughout their school-age years. Throughout childhood, regular visits to a pediatrician are vital to maintaining good health. But many parents don't think to take their child to an eye doctor unless they suspect vision problems.

As a practicing doctor of optometry in [City] and a member of the [State Optometric Association], I'm committed to ensuring our children go to school visually prepared for academic success. That's why I'm urging the [State] legislature to [introduce/pass] legislation to require that children have a comprehensive eye examination before first grade.

Undetected and untreated eye problems can have a serious impact on a child's life. One in five children has a vision problem, and by the time they enter school, 25 percent of those children need or wear corrective glasses. Children with eye or vision problems may be limited in their ability to learn in school, participate in sports and fully engage with the world around them.

Many children receive vision screenings in school or a primary care setting, but screenings are inadequate to detect a range of serious eye and vision problems. Parents of children who "pass" a screening are often given a false sense their child's eyes are healthy, when their child may in fact have a serious, undiagnosed condition. Routine school screenings provide less than four percent of the eye tests needed to help children see, and of the children that are found to have eye problems through screening, 61 percent never visit the doctor for necessary follow-up help.

Comprehensive eye examinations administered by an eye doctor, such as a doctor of optometry, include tests to determine nearsightedness, farsightedness, amblyopia (lazy eye), astigmatism, eye coordination, eye muscle function and focusing abilities. The National Academies of Science, Engineering and Medicine's vision report underscores that comprehensive eye exams are *"the gold standard in clinical vision care to most accurately identify and diagnose eye and vision problems."* And the research supporting the American Optometric Association's evidence-based guideline, updated in 2017, recommends preschool-age children receive a comprehensive eye exam during their first year of life, between the ages of three and five, before entering 1st grade and annually thereafter.

States including Kentucky, Illinois and Nebraska already require comprehensive eye exams. In Nebraska, which now requires comprehensive eye exams for kids entering school, an estimated 1 out of every 8 students had an eye problem that would not have been detected during a school-based screening. Laws in these states have significantly contributed to successful early

intervention for vision problems, diseases and disorders that if diagnosed early can be treated before irreversible damage is done.

The bottom line: Our children deserve the brightest of futures. The sooner eye problems are identified and addressed, the better the outcome in childhood and beyond. I encourage our elected officials to make this bill a priority, so our children receive the eye and vision care they need and the opportunities to succeed they deserve.

Template Letter to the Editor for State/Local Media

Title: Protecting Our Children’s Vision

To the Editor:

As a practicing doctor of optometry in [City] for the past [XX] years and a member of the [State Optometric Association], I’m committed to ensuring our children go to school prepared to reach their fullest potential. That’s why I’m urging the [State] legislature to [introduce/pass] legislation to ensure that our children have a comprehensive eye examination before first grade.

Eye problems that go undetected and untreated can have a serious impact on a child’s life. One in five children has a vision problem, and by the time they enter school, 25 percent of those children need or wear corrective glasses. Many children receive vision screenings in school or a primary care setting, but screenings are inadequate to detect a range of serious eye and vision problems.

Comprehensive eye examinations administered by an eye doctor, such as a doctor of optometry, include tests to determine nearsightedness, farsightedness, amblyopia (lazy eye), astigmatism, eye coordination, eye muscle function and focusing abilities. The research supporting the American Optometric Association’s evidence-based guideline recommends comprehensive eye exams during their first year of life, between the ages of three and five, before entering 1st grade and annually thereafter.

States including Kentucky, Illinois and Nebraska already require comprehensive eye exams. I encourage our elected officials to make this bill a priority, so our children receive the eye and vision care they need and the opportunities to succeed they deserve.

[Name]

[Address]

[Phone and email]

Q&A (for reference and for public distribution as needed)

What would this legislation do?

- It would ensure that all children entering our state’s public school system receive an in-person, comprehensive eye exam from an eye doctor, such as a doctor of optometry, to ensure they have their best chance to achieve.

Why do we need this law?

- Maintaining good eye and vision health is critical to a child’s ability to learn, participate in sports, engage in constructive social interactions and generally reach their full potential.
- Comprehensive eye exams are considered the highest standard of care when it comes to protecting eye and vision health and preparing for school success.
- School-based screenings are inadequate for catching a range of serious eye conditions.

What specifically is wrong with school-based screenings?

- Traditional vision “screenings” tend to focus on distance visual acuity (VA) – but they do not measure how well the eyes work together, focus up-close for reading and computers, or move efficiently.
- When a problem **IS** found, most children do not receive necessary treatment – one study found only 38.7% of public school children *who failed a screening* received follow-up care.
- 73% of children with eye and vision problems will pass a traditional vision screening for amblyopia, or lazy eye and never have their problem corrected.
- Comprehensive eye exams are administered by an eye doctor, such as doctor of optometry, and are much more thorough. They include an overall eye health exam, as well as tests to determine refractive error, eye coordination, eye muscle function, eye focusing abilities and, eye health status (glaucoma, retinal problems, and neurological anomalies).

Have any other states passed a law like this? Has it been beneficial?

- States including Illinois, Kentucky, and Nebraska have implemented critical programs requiring comprehensive eye examinations for children.
- In Nebraska, which now requires comprehensive eye exams for kids entering school, an estimated 1 out of every 8 students had an eye problem that would not have been detected during a school-based screening.

- A seven-year progress report in Kentucky found that under the comprehensive eye exam requirement, 13 percent of children required vision correction for a previously undiagnosed condition, 3.4 percent were diagnosed with amblyopia, and 2.3 percent were found to have strabismus.
- States like Kentucky have seen no additional financial burden due to the legislation and they are potentially alleviating the overall cost of undiagnosed vision problems, estimated at \$5.8 billion.

Is it widely accepted that children need a comprehensive eye exam before entering school?

- Evidence supports that all children should receive a comprehensive eye exam before beginning 1st grade.
- An estimated 1 in 5 children has a vision problem, which can interfere with normal development, school performance, social interactions, and self-esteem.
- Vision disorders that occur in childhood may manifest as problems in a child's early school-age years and well into adulthood, affecting an individual's level of education, employment opportunities, and social wellbeing.
- Research supporting AOA's evidence-based guideline, updated in 2017, recommends preschool-age children receive a comprehensive eye exam during their first year of life, between the ages of three and five, before entering 1st grade and annually thereafter.

Are comprehensive eye exams expensive? Will parents be able to afford them?

- Federal law currently requires most health insurance plans to cover pediatric vision exams at little or no cost to the parent. This is called the pediatric essential health benefit.
- Over the long term, comprehensive eye examinations are far less expensive than the medical and social consequences of missed eye disease and poor vision. They are a wise investment in the future of America's children.
- An estimated 70 percent of affected children are insured for comprehensive eye examinations through private insurance or may otherwise be covered by Medicaid, the federal Children's Health Insurance Program (CHIP) or other state or federal program.
- Relationships with organizations such as the Lion's Club offer exams and care at discounted rates and some programs provide care at no cost to the patient's family.

Does this bill include any means of helping parents pay for the exams?

- Every law is different, but Kentucky is a constructive example. The Kentucky law originally set aside a total of \$150,000 per year to help offset the cost of the exams for children not eligible for other programs and for those without private insurance coverage.

- According to the Kentucky Optometric Association, in the first two years of the state's program, the reserve fund paid for only 141 total exams. Due to lack of necessity, the state was able to eliminate the allocation altogether.
- Optometrists, ophthalmologists and local charity organizations also provide ongoing assistance for families in need.

Would getting all kids a comprehensive eye exam raise healthcare costs?

- Actually, the reverse is true – comprehensive eye exams do not put a heavy economic toll on states. What DOES increase healthcare costs are untreated eye and vision problems.
- In most instances, insurance already covers the costs of comprehensive eye examinations. **[IF APPLICABLE:** The financial assistance provided by the bill serves to support those who cannot afford, and have no access to coverage or charity programs for, the exams.]
- The actual financial burden on states is very small, due to free programs and utilization of insurance.
- The national economic burden of vision problems for children age 17 and younger has been estimated at \$5.7 billion annually.
- Based on an ADHD prevalence rate of 5.29%, the AOA estimates comprehensive eye exams could reduce national Medicaid and CHIP spending by \$498 million annually.

Why is early diagnosis so important?

- During the first 12 months of life, infants begin to gain visual skills that are vital to their long-term development. Eye and vision disorders can be more easily corrected if treatment begins early.
- Early diagnosis of serious and potentially blinding disorders, such as amblyopia, can literally save a patient's sight. Comprehensive eye examinations are especially critical to diagnose and treat diseases which can lead to poor school performance and other issues, including permanent vision loss, that impact quality of life.

Can the requirement of comprehensive eye exams for children lead to over-prescribing eye glasses?

- No. Comprehensive eye exams for children are critical to addressing untreated amblyopia cases that can lead to blindness, problems which can lead to poor school performance and other issues that affect a person's overall quality of life and can increase costs to society.

- In Kentucky, estimates suggest the comprehensive eye exam requirement led to the detection and diagnosis of amblyopia in 3.4 percent of children and strabismus in 2.3 percent of children.

Exams vs. Screenings Fact Sheet (for public distribution)

Comprehensive Eye Exams: The Highest Standard in Clinical Vision Care

- **There is no replacement for a comprehensive eye exam.** These exams are administered by an eye doctor, such as a doctor of optometry, and include tests to determine nearsightedness, farsightedness, amblyopia (lazy eye), astigmatism, eye coordination, eye muscle function, focusing abilities, eye diseases, and other conditions.
- **Vision screenings are inadequate to detect a range of serious eye and vision problems that could impact a child's future vision health.** Traditional vision "screenings" tend to focus on distance visual acuity (VA) – but they do not measure how well the eyes focus up-close, work together or move efficiently.
- **Parents of children who "pass" a screening are often given a false sense their child's eyes are healthy.** Screenings typically only test distance visual acuity, and a child may have a serious, undiagnosed eye or visual condition.
- **Routine vision screenings provide less than four percent of the eye tests needed.** When a problem **IS** found, most children do not receive necessary treatment – one study found that only 61% of public school children who failed a screening do not receive follow-up care.
- **Exams are more standardized and comprehensive than screenings.** They are particularly important in leading to the detection and treatment of diseases and disorders in young children. In addition to overall ocular health, exams test a patient's visual acuity, focusing, visual alignment, ocular motility, binocular fusion and eye tracking.
- **Even the most sophisticated vision screenings do not test for the necessary learning-related visual skills.** Screenings do not test for skills such as visual alignment, binocular fusion and color vision.
- **Vision screenings cannot detect diseases with ocular manifestations.** In addition to other disorders, screenings cannot detect diseases such as diabetes and hypertension.
- **Comprehensive eye exams are the highest standard of care in clinical vision care.** The National Academies of Science, Engineering and Medicine has concluded comprehensive eye exams are "the gold standard in clinical vision care to most accurately identify and diagnose eye and vision problems."

Fact Sheet About Optometry (for public distribution)

Optometrists: America's Family Eye Doctors

Doctors of optometry are the country's leading practitioners of eye and vision health, providing more than two-thirds of primary eye care in the United States. As primary health care providers, doctors of optometry receive extensive and ongoing training to examine, diagnose, treat and manage ocular disorders, diseases and injuries, as well as health conditions that manifest themselves in the eye. The American Optometric Association is the leading authority on quality eye and vision care, and an advocate for our nation's health, representing more than 44,000 doctors of optometry, optometric professionals, and optometry students nationwide.

Doctors of optometry are physicians who receive extensive and ongoing training.

- All optometrists earn a post-baccalaureate, four-year Doctor of Optometry degree at an optometry college accredited by the Accreditation Council on Optometric Education.
- Following their undergraduate education and before entering optometry school, students complete three or more years of pre-optometry courses at an accredited university or college.
- Before applying to optometry schools, students must pass the Optometry Admission Test (OAT), which is sponsored by the Association of Schools and Colleges of Optometry (ASCO).
- A growing number of optometry graduates go on to specialized residency training programs prior to beginning practice, and all optometrists must pass a national board examination administered by the National Board of Examiners in Optometry and/or individual State Boards of Optometry to acquire their state license before beginning practice.
- Practicing optometrists must complete a prescribed number of hours of continuing education focusing on new examination methods, diagnostic and treatment advances, and techniques resulting from the latest optometric and ophthalmic research.

Doctors of optometry focus on patients' total health.

- A comprehensive eye exam from an optometrist includes tests that can determine nearsightedness, farsightedness, amblyopia (lazy eye), astigmatism, eye coordination, eye muscle function, focusing abilities, and numerous other functions.
- Comprehensive eye exams can detect serious eye conditions such as glaucoma, as well as other serious conditions, such as diabetes, which can manifest themselves in the eye.

- Optometrists work closely with other health professionals, including family practitioners, pediatricians, neurologists, ophthalmologists and dermatologists, to protect patients' overall health.
- Optometrists also work in hospitals to provide pre- and post-operative eye care, emergency eye care services, and the use of pharmaceuticals in the diagnosis and treatment of eye disease.

Doctors of Optometry are small business owners and employers.

- Many of the 41,000 optometrists nationwide operate their own business, employing people in communities across the country.
- Optometrists practice in more than 7,000 communities in the U.S. In more than 4,300 communities, optometrists are the only primary eye care providers.
- Optometrists serve a vital role in promoting eye and vision health for children and adults in communities across the country.

Disease List (for public distribution)**Diseases Detected During A Comprehensive Eye Exam**

Comprehensive eye examinations by doctors of optometry can result in earlier detection, timelier treatments, and reduced disabilities and deaths from a range of diseases and disorders that disproportionately burden vulnerable pediatric populations. The following diseases can be detected during a comprehensive eye examination at the following life stages (LS):

- A. Infants and Toddlers**
- B. Children**
- C. Adolescents**

Systemic Diseases and Conditions *Most to Least Common*: (ICD-9-CM Codes)

1. Diabetes (250-259) (Type 1, Type 2) LS/ A,B,C
2. Hypertension (401) LS/ C
3. Herpes Simplex (054.4) LS/ A,B,C
4. Raised Intracranial Pressure LS/ A,B,C
5. Chlamydia / Adult Inclusion/ TRIC (099.5) LS/A,C
6. Migraine (346) LS/B,C
7. Thyroid Dysfunction (242.0) LS/ C
8. Dermatitis Atopic (691) LS/A,B,C
9. Influenza (487) LS/A,B,C
10. Pre-Diabetes/ IFG/ IGT) LS/ B,C
11. Sinusitis Chronic (473.0) LS/C
12. Pituitary Tumors (194.3) LS/C
13. Juvenile Rheumatoid Arthritis LS/B,C
14. Meningitis (320) (321) LS/ A,B,C
15. HIV-AIDS (042.0) LS/A,B,C
16. Gonorrhoea (098.0) (098.4) LS/A,C
17. Syphilis (090.0) (091.5) LS/A,C
18. Sturge-Weber Syndrome (759.6) LS/A,B,C
19. Neurofibromatosis LS/A,B,C
20. Myasthenia Gravis (358.00) LS/C
21. Marfans Syndrome (090.49) LS/A,B,C
22. Down's Syndrome (758) LS/A,B,C
23. Usher's Syndrome LS/ A,B,C
24. Stevens-Johnson Syndrome (695.1) LS/C
25. Albinism (270.2) LS/A,B,C
26. Anemias (280-289) LS/ A,B,C
27. Leukaemias (200-208) LS/A,B,C

28. Other Cancers (190.0) (216.1) (224.0) LS/A,B,C
29. Tuberculosis (017.3) LS/B,C
30. Measles (055.7) LS/A,B,C
31. Rubella (056.0) LS/A,B,C
32. Rubella (056.00) LS/A,B
33. Vitamin A Deficiency (268) LS/ B,C
34. Hepatitis (571) LS/B,C
35. Multiple Sclerosis (340) LS/ C

Environmental Exposures *Most to Least Common*:

1. Histoplasmosis (115.90) (115.92) LS/A,B,C
2. Toxoplasmosis (130.1) (130.2) (130.9) LS/A,B,C
3. Toxocariasis (Dog Round Worm) (128.0) LS/A,B,C
4. Toxic Maculopathies (Plaquenil and other drugs) (362.55) LS/A,B,C
5. Toxic Amblyopia (377.34) (Alcohol, drugs, environmental toxins) LS/A,B,C