



**ORIENTATION AND MOBILITY FORM**

*If there is not an O&M instructor for this student please have the vision teacher or resource teacher fill out this form to the best of their knowledge.*

**Return this form at least THREE WEEKS prior to the clinic date**

**STUDENT:** \_\_\_\_\_

**O&M SPECIALIST:** \_\_\_\_\_  
(OR Vision/Resource Teacher)

Does the student receive O&M training at school?      Yes      No

If yes, how often? \_\_\_\_\_

If no, when was the last O&M assessment completed? \_\_\_\_\_

Does the student use an ID cane or a long cane for independent travel? \_\_\_\_\_

Is the student currently using a monocular or other optical aid for independent travel?      Yes      No

If yes, what optical aid and magnification power? \_\_\_\_\_

*Please put check mark in box for either Y, NW, or N*

**Y** = Yes       **NW** = Needs Additional Work       **N** = No

**GENERAL O&M SKILLS**

**Y**     **NW**     **N**

Knows home address and phone number

Travel independently in familiar neighbourhood

Describe home neighbourhood e.g. (rural)

Describe their visual impairment

Follows directions

Identifies landmarks

Retains orientation

Solicits aid

Discriminates between the sounds of small automobiles, city buses, and delivery trucks

Familiar with city travel / public transportation

## Community Travel Skills

Y  NW  N

Locates crosswalks  
Scans  
Locates Cars  
Determines safety/danger  
Knows when to cross  
Sees pedestrian signals/traffic lights  
Can see the white lines of a crosswalk  
Remains in crosswalk when crossing  
Properly align for a street crossing  
Knows the meaning of traffic signs  
Curb or drop-off detection  
Uneven surface  
Changes in lighting  
Travel in stores, or congested areas  
Locates entrances  
Locates departments in stores  
Locates items  
Communicates with desk clerk  
Locates cashiers  
Proceeds through lines in stores  
Makes change  
Locates exits

## Familiar Environments (School)

Y  NW  N

Locates building  
Locates rooms  
Locates unfamiliar rooms  
Travel without tripping or bumping  
Negotiate steps, curbs, ramps safely  
Travel/walk safely without assistance  
Participates in P.E.  
  
Eat and drink a typical meal or snack  
Manage clothes, including fasteners  
Pursue hygiene activities  
Pursue written tasks  
Set-up and clean up

## ADDITIONAL INFORMATION:

### GLARE ASSESSMENT

Glare is recognized as a main contributor to reduced vision to bright environments. Different environmental conditions can produce varying types of glare. For all types of glare, a hat with a 3 inch brim can substantially reduce glare. Please comment on any of the glare issues you have observed, noting whether a hat is being worn.

1. Discomfort Glare – student squints when facing medium/bright light outdoors
2. Dazzling Glare – student is abnormally sensitive to light and complains that it is too bright outside
3. Spectral Glare – student squints or is sensitive to light around water or snow