# Testing and Interpretation of Visual Perceptual Skills

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#### **Our Goals**

- develop an understanding of how optometric tests of vision perception are conducted
- be able to identify sub-optimal test results that indicate a visual problem
- be able to identify "normal" test results that may also indicate a potential visual problem

#### More (important?) Goals

- learn how test results correspond with patient symptoms and parent observations
- communicate the connection between testing and the patient's daily life using language the patient and parent can understand
- apply knowledge of the above when planning optometric vision therapy activities

#### Standardized Tests

- Test of Developmental Eye Movements
- Test of Visual Perceptual Skills (7 subtests)
- Beery-Buktenica Visual Motor Integration
- Wold Sentence Copy
- Piaget Left-Right
- Gardner Reversal Frequency
- Birch-Belmont Auditory-Visual Integration

#### History

Parent History

Patient History

Teacher History

History History History History History

#### The Biological Communication Ratio



#### Standardized Tests

 What does the test measure (or what do the designers of the test say that it measures)

What to watch for during the test

 Potential symptoms associated with the test (this is the biggie)

#### **DEM SCORESHEET**

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- Speed and Accuracy of Saccadic Eye Movements
- Comparison of horizontal to vertical saccadic ability
- Normative data from age 6.0 to 13.11.
  - (13.11 is considered to be adult level)

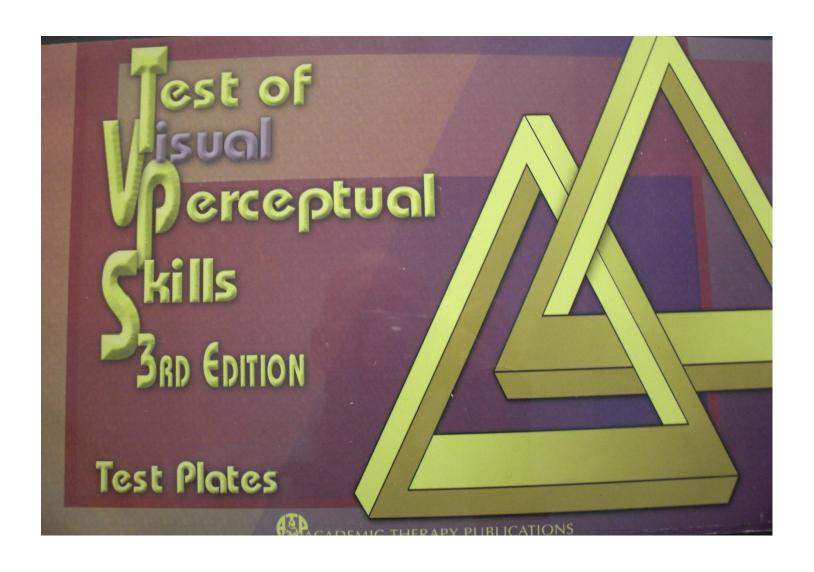
- Ratio is important: Horizontal to vertical reading/tracking speed
  - High ratio: rapid vertically, but slow horizontally
- Vertical speed can be negatively impacted by speech problem, non-specific automaticity difficulties
- Errors are scored only in horizontal subtest, but are considered when determining baseline speed from vertical subtest
- Watch for:
  - Head movement
  - Tendency to use finger as place marker (despite instructions to the contrary)
  - Fast and inaccurate or Slow and accurate
- Results usually reinforce history and observations from initial evaluation

- Misreads or skips words, small words in particular
- Skips or rereads lines
- Uses ruler or finger-pointing to keep place
- Says the words seem to move or jump on the page
- Loses place/searches for place to start on the page
- Falling behind in reading, below grade level
- Problems with Fluency and/or Comprehension
  - Poor fluency, good comprehension (slow and accurate)
  - Good fluency, poor comprehension (tracking is a mental drain)
  - Poor fluency, poor comprehension (it's all a mess! how is listening?)
  - Good reader in general (imagine how much better it could be)
- Fatigue, especially associated with head movement

- Fast and inaccurate approach is usually a reflection of avoidance, an attempt to complete an unpleasant, uncomfortable, or sometimes painful task as quickly as possible. (This approach may or may not be reflected on other tests.)
- What is the significance of a good performance on the DEM in the presence of vision-related reading symptoms?

- Considerations for Treatment
  - (Preparing the parents and the patient)
  - How to arrange conditions for the patient's needs
  - Peripheral-Central Integration and Saccades
  - Starting with the easy stuff
  - Classroom Accommodations
    - Enlarged print
    - Vertical math
    - Extra time and/or reduced workload

#### **TEST of VISUAL PERCEPTUAL SKILLS**



#### **TEST of VISUAL PERCEPTUAL SKILLS**

lame:chool:							
Reason for Testing: Date of Test Date of Birth Chronological Age Do not round months up 18	vear year 7	month		attenti	nt has known on problems? nt has known problems?	(diagnosed)	] Y
Subtests		Subtest Sco	ores		Index	Scores	
	Raw Score	Scaled Score	Percentile Rank	Overall	Basic Processes	Sequencing	Complex
Visual Discrimination (D)	120	1737	(99) 16		Trocesses		Trocesse
2. Visual Memory (ME		9	37				
3. Spatial Relations (SP	A) (13) 4		95 9				
4. Form Constancy (CC			(84) 16				
5. Sequential Memory (SE	-	10	50			Total Control of the	46.65
6. Figure Ground (FC 7. Visual Closure (CL		1	31		-		
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A rough analogy:

"Processing"
happens between

"Input"

and

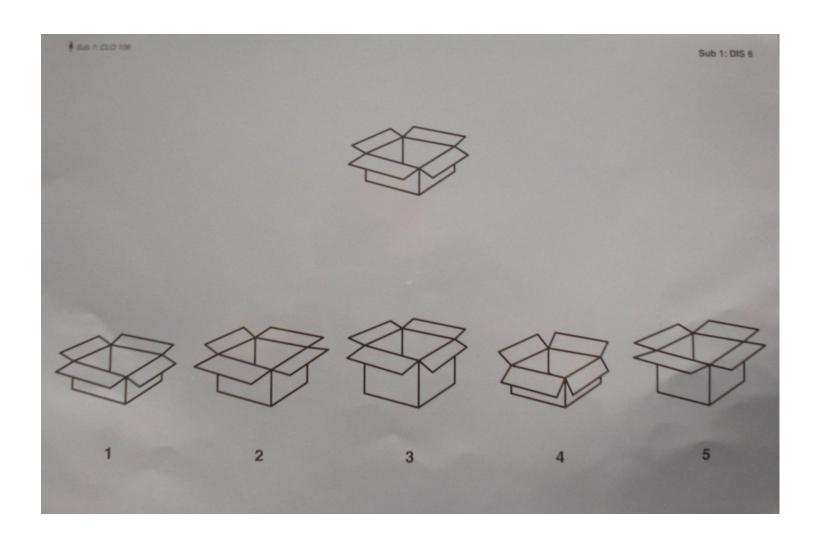
"Output"

#### TEST of VISUAL PERCEPTUAL SKILLS Visual Discrimination

Patient's ability to distinguish similarities & differences

- Just-noticeable-differences (JNDs) demand gradually increases
  - designs complicated by directionality, figure-ground
- Watch for tactile strategy
  - (Tracing the form with their finger)

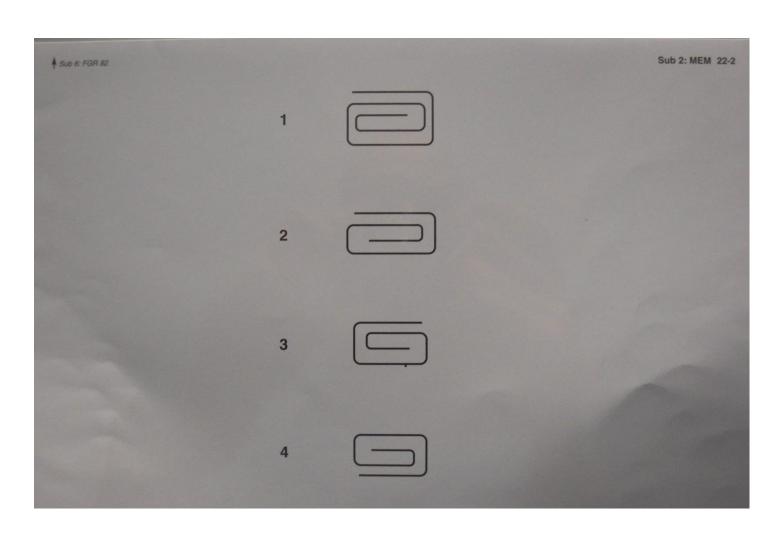
#### TEST of VISUAL PERCEPTUAL SKILLS Visual Discrimination



#### TEST of VISUAL PERCEPTUAL SKILLS Visual Discrimination

- Confuses similar looking letters (eg. i as j, 5 as S or 3 as 8)
- Reading music: Difficulty distinguishing similar looking but different notes or symbols on a staff
- Poor ability to perceive small changes in the world around them (parent may volunteer examples, e.g. poor proofreading)
- Patient might need to touch things to feel like they really know it

- Gestalt Memory (big picture)
- Ability to recall a visual image over time
   Find it among a mix of other similar shapes
- Ask, "How are you remembering that?"
  - Visually
  - Auditorily (lip movement)
  - Tactile (finger tracing)



- Difficulty recognizing the same word a few sentences later
- Difficulty remembering the main idea of a story
  - Poor visualization skills, can't see the "big picture"
- Might remember story via listening, but not reading
- Learns spelling list by Thursday night, but forgets it Friday morning under the visual stress of the test, and/or when writing the same word in a story later
- Make the same mistake over and over
  - May or may not perceive they are doing so
- Forgets what happened yesterday
- Parental frustration is common

- A visually competent individual generally accesses visual images when recalling as opposed to auditory lists or kinesthetic movement:
  - Mona Lisa example Many have visualizations of the painting, but each is individual to that person's experience of the painting (saw it in a book vs standing in the Louvre)
- Think of the house you grew up in example Evokes many visual images rather than an auditory description
- Other Types of Memory: When asked to recall a favorite song, you imagine hearing the music. When asked to think about your golf swing, you move as if you were swinging a club. But auditory and kinesthetic (muscle memory) strategies are generally ineffective in the classroom.

 Strong Results often associated with strong "Episodic Memory", recall of math facts, social skills

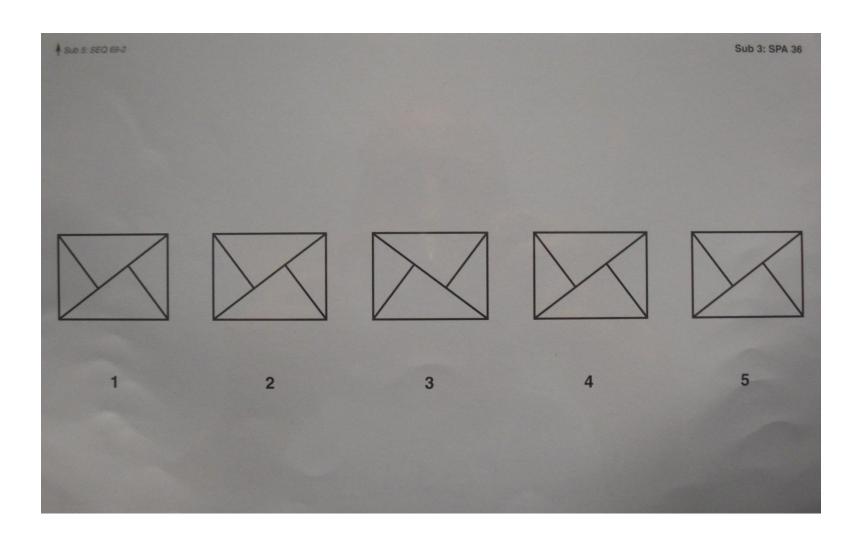
Strong Results often might not correlate with academic success

### TEST of VISUAL PERCEPTUAL SKILLS Visual Spatial Relationships

 Ability to perceive the orientation of objects, especially in relation to other objects

- Sometimes complicated by figure-ground
  - Kind of a "specific" visual-discrimination

## TEST of VISUAL PERCEPTUAL SKILLS Visual Spatial Relationships



### TEST of VISUAL PERCEPTUAL SKILLS Visual Spatial Relationships

- Reversals of letters and words with similar shapes particularly past 2<sup>nd</sup> grade
- Misreading words, or guessing at words because they are unsure of the word
- Errors when copying mirror-image letters
- Transposing numbers eg. 26 as 62, or 15 as 51
- May be problems distinguishing Left and Right

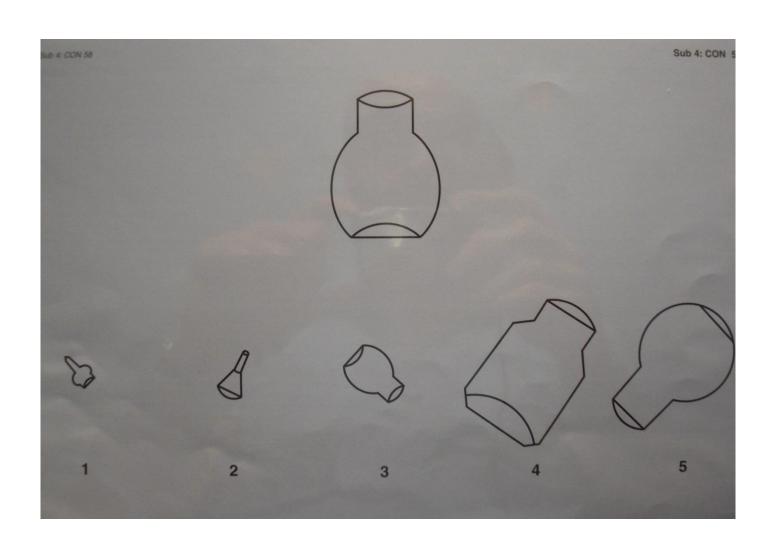
### TEST of VISUAL PERCEPTUAL SKILLS Visual Spatial Relationships

Directionality: Left-Right discrimination of printed material

- Recognizing "flipped" images
  - rotated along the Y-axis (vertical axis)

- The interpretation should also consider patient's performance on:
  - Piaget Left Right
  - Gardner Reversal Frequency

 Ability to perceive the same object or shape when it appears in a different orientation, size or different surrounding



 Ability to recognize that the shape is the same shape regardless of how big or small it is, which way its pointing, or if there are distracting lines drawn around it

- Child is unable to recognize the same shape in different orientations, sizes or surroundings: e.g. a square is still a square regardless of its size, what surrounds it, or even if it is resting on its point
  - it is still a square not a diamond
- Early readers may not recognize that an "a" is an "a" whether it appears at the beginning, middle or end of a word or if it appears in a different font: a a a a
- Difficulty recognizing phonemes, roots, prefixes or suffixes, e.g. -tion generally matches with "shun" sound -gress is a root in Congress, Egress, Progress

- Misreading words, or guessing at words because they don't recognize it as a word they know (consider visual memory too)
- In sheet music, child is unable to recognize the notation
  - A note rotated vertically & horizontally has the same value

### TEST of VISUAL PERCEPTUAL SKILLS Sequential Memory

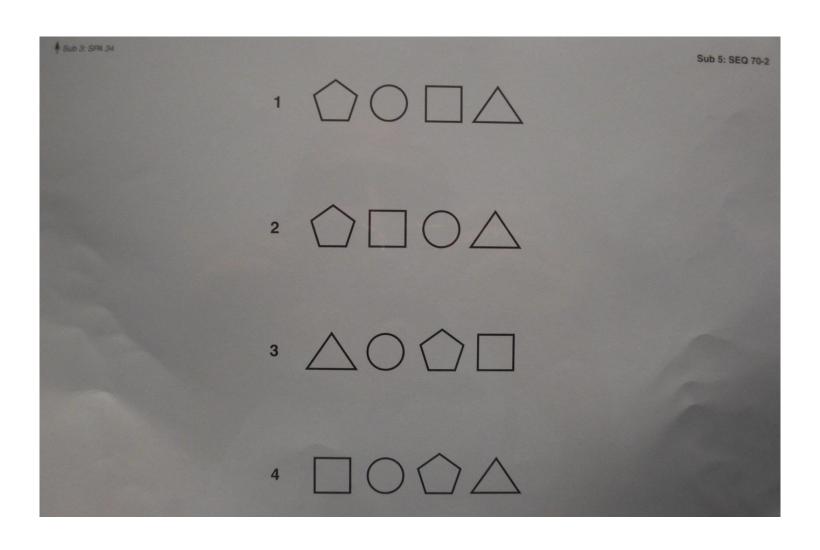
 Ability to remember a certain sequence of simple objects or shapes (as distinct from Gestalt)

 Number of objects in sequence increase as test progresses

## TEST of VISUAL PERCEPTUAL SKILLS Sequential Memory



### TEST of VISUAL PERCEPTUAL SKILLS Sequential Memory



### TEST of VISUAL PERCEPTUAL SKILLS Sequential Memory

- Reveals patient strategy for recalling sequences:
  - Visual and/or Auditory
  - Is child building visual images of the sequence, or are they naming the items in the sequence and repeating them (silently or aloud)

 Tester asks child, "How did you manage to do that?" for insight into strategy (and awareness thereof)

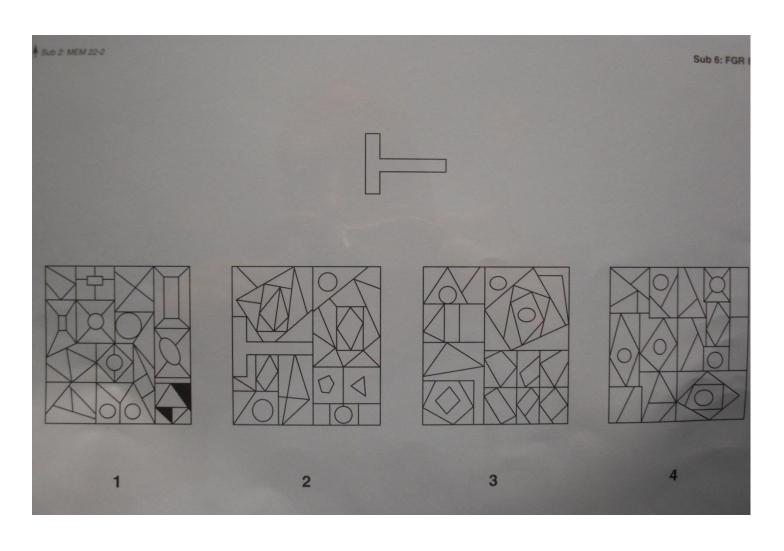
# TEST of VISUAL PERCEPTUAL SKILLS Sequential Memory

- Reading problems: decode a word in one sentence, but must re-decode it in another sentence...
- Spelling problems: No visual memory of a word, do not recognize that a word is misspelled, scores low on spelling tests even though child seemed to know the word during drills
- Auditory approach: generally try to spell word phonetically. eg. school=skul, what=wut
- Suggests child is not using or is unable to use visualization to recall the sequence
- Algebra: have trouble remembering the sequence in which the problem should be solved
- May remember routines, but not variation in routine

# TEST of VISUAL PERCEPTUAL SKILLS Sequential Memory

- Difficulty following step by step directions or instructions, in order (even with subvocalization)
- Parent tells child to do several tasks, but child only does one or two, the rest don't get done
- Has difficulty remembering any complex list of instructions
  - chores, how to clean up your room, preparing food
- "Pick up your clothes, put them in the basket, fold your socks and put them in a drawer, get fresh towels from the closet and replace the old towels with the new ones, then put the dirty towels in the basket."
  - Child picks up the clothes and puts them in the basket, and nothing else.

Test ability to direct visual attention at an object of regard in a busy background



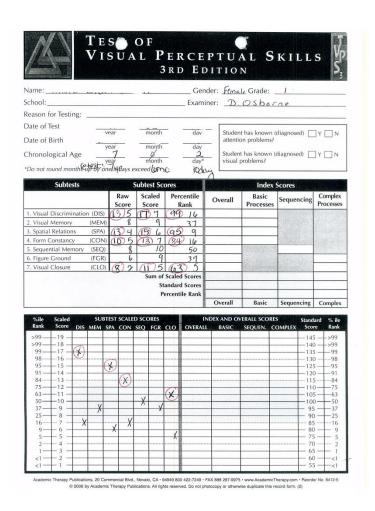
- Can child find what they want to find in a busy visual environment
  - (Where is the point of regard?)
- Consider performance on this test in relationship to other tests:
  - Visual Fields
  - Impulsive saccadic eye movements?
  - Accommodation, where to look along the Z axis
- May indicate difficulty ignoring background information

- Unable to find Waldo or difficulty with "Hidden Picture" or "I Spy" puzzles
- "Mom, where is my..."
- Child takes an open book test but can't find the answer even though it's right there
- Patient may be distracted by other objects in their environment

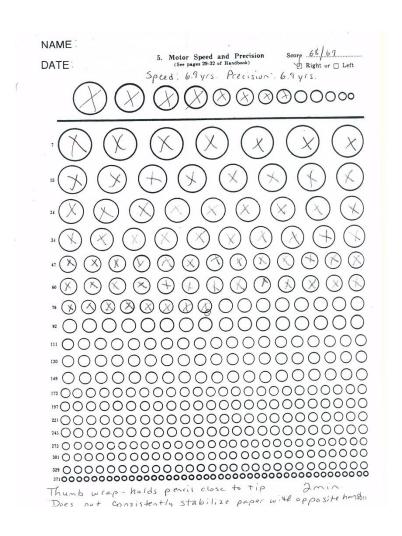
- A small child may sit very close to TV, not because acuity is poor, but because they don't want to be distracted by all the objects surrounding the TV
- Overly decorated classroom may make it difficult for a child to concentrate
  - e.g. Word Wall "helpful" lists of sight words make finding a particular word very challenging

#### **TEST of VISUAL PERCEPTUAL SKILLS**

#### Discussion of Overall Results



- What's up with "Basic" vs "Complex" vs "Sequencing"?
- Highs and Lows as a prognostic indicator
- How the patient's problem-solving strategy impacts treatment plan



- Eye-Hand coordination and control
  - Specifically "Pencil and Paper"
     (not directly related to Hand-Eye in sports)
- How fast and accurate can patient be when writing X's inside circles

Timed Test (length varies with age of patient)

- Fine Motor problem? Visual Motor problem?
- May be either or both
- Fast & Messy: Visual Motor problem
- Hand is fast, but visual control of movement is deficient
- Slow & Neat: Visual Motor problem? Does patient choose accuracy over speed? Or fine motor (finger difficulty)?
- Slow & Messy: fine motor, or both not able to distinguish from this test alone
- Interpretation of this test informed by oculomotor tests, and other pencil-paper tests (i.e. Pursuits, Saccades, Wold Sentence Copy, Beery VMI)

- Child may have difficulty completing written work in time allowed
- Child's writing may be neat initially, but penmanship quickly deteriorates
- Child may exhibit poor pencil grip, or excessive hand/wrist/arm pressure when writing

```
of the black and pink house
quickly to see the bright violet
behind a cloud.
            4:53 = 6600 = 22.5 4/m
 Four Men and a jolybox came out
```

 Integration of the visual skills required for reading and for writing

 Tests the ability to copy from the top of a page to the bottom

Timed test (stop if not complete at 3 minutes)

- Normative data based on letters per minute, based on both printing and cursive.
- From 2<sup>nd</sup> to 8<sup>th</sup> grade
- Compare speed on this test with Motor Speed & Precision
  - If the patient is fast on one of them, there is likely not a severe hand or finger problem
- Consider how speeds affect sizing, spacing, staying on the line, reversals, errors in spelling, punctuation, omissions...

- Messy handwriting
- Rushing to complete copying before time runs out
- Messy, inaccurate copying from board to paper
  - homework assignments, spelling lists, agenda items
- Parent can't make out homework on the child's copy
- Sometimes manifests as a mismatch between verbal and written expression: e.g. Child can tell you an answer to a question, but struggles to express the same thought in writing
- This paper to paper test may be neater than patient's copying from a distant board or when doing extended writing assignments, such as writing a story

#### Considerations of MS&P and Wold

- Is there potentially a hand problem complicating the vision problem?
  - Slow on both tests, and other fine motor symptoms (hand problems interfere with drawing, eating, buttons, shoe tying...)
- Does the patient rush with everything?
  - Wait and look at the next test...

### Beery-Buktenica Test of Visual Motor Integration (5<sup>th</sup> edition)

The Beery-Buktenica Developmental Test of Visual-Motor Integration			Name:			First Sex: ØF 🗆 I		
Beer Ages 2 through 7 by Keith E. Beery, No	(SHORT FO	DRM)		Birth l	ate:	year e: 7 years	month day months than 15 days as one	,
SUMMARY  See the Beery VMI manual (fifth edition) for norms.			PROFILE  Standard Beery Visual Motor  Score VMI Perception Coordination Perce				Percentile	
	Beery VMI	Visual Perception	Motor Coordination	145 140	-	-		99.7 99.2
Raw Scores:	18			135 130	-		-	99 98
Standard Scores:	96	<u> </u>	<u></u>	125 120 115	-			95 91 84
Scaled Scores:	·			110 105			-	75 63
Percentiles:	39			100 95	-			50 37
Other Scaling:	_			90 85 80				25 16 9
Comments and Recommendations: Thumb wrap			75 70				5 2	
Holds, perc Does not	il close always s	to tip tabilize b re hand	ozklet	65 60 55	:	-	-	1 .8 .3
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#### Beery VMI Recording and Scoring

				Task		T		
Age Norm (Yrs-Mos)	Score	Observations	No.		Age Norm (Yrs-Mos)	Score	Observations	
1-1 Imitated Mark or Scribble			14	X	4-11	1		
1-4 Spontaneous Scribble			15	$\triangle$	5-3	1		
1-9 Contained Scribble			16	4	5-6	Ø		
2-0 Imitated			17	$\times$	5-9	1		
2-6 Imitated			18	$\longleftrightarrow$	6-5	d		
2-9 Imitated			19	<b>®</b>	6-8	)		
2-10 Copied	1		20	0 0 0	7-5			
3-0 Copied	)		21	$\infty$	7-11	Ø		
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4-7	)							
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Integration of visual system with motor

- Subtests of Visual Perception and Motor Coordination
  - (I do not use these subtests)

Norms from age 2 to 100 years

Grading: WHEN IN DOUBT,
 READ THE MANUAL

- Watch pencil grip and pencil pressure
- Body/Head Posture
- Tilting or turning the paper
- Watch location of form in the space, not just degree of accurate copying

- Patient's ability to perceive and copy forms or shapes accurately depends in "input" and "processing"
  - Refer to previous testing when interpreting VMI
- Drawings show patient's part-to-whole processing
- Problems correspond to difficulty with praxis (motor planning) identified by OT
  - Can you interpret based on another clinician's test results?

- Variations in letter size, shape, even within a sentence
- Scrawling, crowding of letters and words, inconsistent, poor spacing or seating
- Older child prints rather than using cursive, which requires fine motor control
- Some children never learned to write cursive, use keyboard instead, never learn fine eye- hand coordination.
- Difficulty with drawing, art projects
  - Human figures rendered below detail expected for age
  - Errors when copying shapes or drawings
  - Asymmetrical rendition of symmetrical subjects

- Misalignment of digits in math
- Poorly formed digits (5 looks like a 2, a 7 looks much like a 4)
- Makes math errors because of misalignment
- Must recopy math homework for neatness and takes a long time to recopy
- May not even perceive that work is messy or unreadable
- Gets angry, upset because they think they have already completed the work
- Difficulty copying from the board

- Slow, tedious, child labors intensely when shifting gaze from paper to board and back
- Cannot complete copying homework assignments before teacher erases it
- Often has a death grip on their pencil, leads to hand pain when writing
- Uses gross rather than fine motor to control writing instrument i.e. uses arm & shoulder (large) muscles to move the hands and fingers
- May be associated with difficulty using scissors, rulers, compass, threading a needle

### Interpretation of "Output" Results

Hand/Finger Issues

Rushing all the time, sometimes, or not at all

 Timing of Treatment, and expectation for improvement

		Name:	
Piag	et Left-Right Awareness Test	Date: _ ,	)
Directly Dir	ctions for Test Questions: e patient misses any item in A – E, they h	ave failed that portion of th	e test.
Á.	Show me your right hand Show me your left leg Touch your left ear Raise your right hand Show me your right leg Show me your left hand		ń.
	Point to your right eye		
````	(Sitting opposite the patient) Show me my right hand Show me my left hand Show me my right leg Show me my left leg		
Le.	(Place a coin on the table left of a per is the pencil to the right or to the left? And the coin – is it to the right or the I (Have the patient go around to the oth Now is the pencil to the right or to the And the coin – is it to the right or the	eft? ner side of the table) left?	(1)
D.	(Sit opposite the patient with a pen in your left arm) Is the pen in my <b>right</b> or left hand? Is the bracelet/watch on my right or left		celet or watch on
E.	(Place three objects in front of the pa and a coin on the right) Is the pencil to the <b>left</b> or right of the Is the pencil to the <b>left</b> or right of the Is the key to the <b>left</b> or right of the pe Is the coin to the <b>left</b> or right of the co Is the coin to the left or right of the p	key? coin? encil? in? encil?	key in the middle,
	Norms for Piaget Right-Left Awaren	ess Test	
		Items passed	
	Age	by 75% of Age	
	5	A	
	6	A A,C	
	7	A,B,C,D	
	8	A,B,C,D	
	10	A.B.C.D	
	11	A.B.C.D.E	

Laterality: Left-Right awareness of self

 Directionality: Left-Right awareness beyond self (other people's sidedness, and orientation among objects)

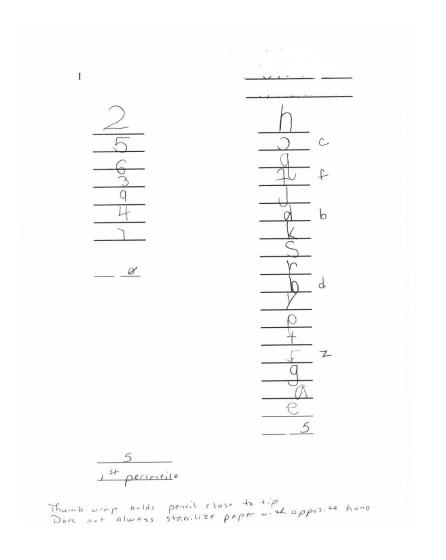
- Laterality (self):
  - Does patient recognize one side of self distinct from other side?
  - Inconsistent labeling is a laterality problem
  - If labels are consistently wrong, it's a labeling problem, not a laterality problem
- Difficulty understanding which way to go, which hand to use, where to turn

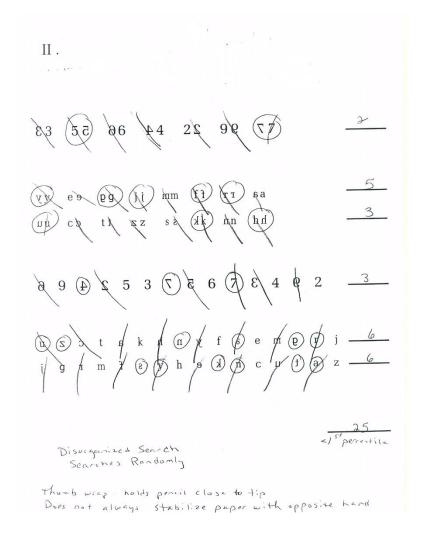
- Directionality (beyond self):
  - Does patient visually recognize that other people have consistent sidedness just as they do?
- Letter, number transpositions, letter, word reversals
- Confuses letters that are mirror images /b/-/d/ when decoding and/or writing
- Trouble giving directions when getting a ride home
- Difficulty reading a map, particularly when top of the map is not in the direction they are facing

Reversals test for letters and numbers
 2 subtests – Execution and Recognition

Execution: write with correct orientation

 Visual Recognition of reversal errors "proofreading"





- Execution subtest: writing numbers and lower case letters (can be compared to neatness on Wold)
- Graded via Norms for frequency of reversals (should be extinguished by end of 2<sup>nd</sup> grade)
- Recognition subtest: cross-out the backwards letters and #s
  - Watch how they search, L to R or other
  - Watch for other strategies; do they write in the air/on the paper (kinesthetic strategies); check previous answers?

- Misreads and/or "misspells" words
- Trouble comprehending words because of reversable letters
- May struggle to discern meaning from context
  - e.g.: "The car saw near the house."
- May reverse letters or #s when reading and/or writing:
  - Sequence /12435/ is misread as /12345/
  - May decode /big/ as /dig/
  - Might say letters of a word correctly, but reversals when writing
  - /handle/ as /hanble/ (marked by teacher as a "spelling error")
- When writing, may not visually recognize their reversals

### Laterality/Directionality

Directionality stands on a foundation of ...

Laterality, which stands on a foundation of ...

What you have to treat first

"What about b's and d's and dyslexia?"

### Birch-Belmont Auditory-Visual Integration Test (AVIT)

- Provides insight into auditory processing and integration with visual skills
- Are they repeating the tap pattern or counting? (In need of extra auditory reinforcement?)
- Do they nod their head or use fingers (in need of proprioceptive reinforcement?)
- Check TVPS visual sequential memory performance to develop broader picture of patient ability

#### Birch-Belmont AVIT

NAME

DATE

AVIT MASTER SHEET

AUDITORY TAP PATTERNS		V		
		EXAMPLES		
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		TESTITEMS		
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Total Correct 4/10

Percentile 5

#### Birch-Belmont AVIT

Consider relationship with saccades, TVPS
 Visual Memory and Visual-Sequential Memory

Musicians often perform well on AVIT

 But strong performance does not necessarily mean no treatment...

#### Birch-Belmont AVIT

- Problems with sequences:
  - Following multiple step verbal directions
  - Spelling, both verbal and written
- Hears, but doesn't understand
- Child who can't translate verbal information to visual imagery has problems following or recalling directions; or remembering the beginning, middle, and end of stories
- Being visually competent makes you a better listener

#### The Big Question

 Is there anything in the test results that doesn't match up with what's going on day to day?