

**HEALTHIER KIDS FOUNDATION  
5<sup>TH</sup> ANNUAL SYMPOSIUM ON  
THE STATUS OF CHILDREN'S HEALTH  
IN SANTA CLARA COUNTY  
Monday May 11, 2015 from 8:30AM- 12:30PM**



## *Testimonials*

**Dr. Dianna J. Ballesteros, EdD, Executive Director of  
St. Elizabeth's Day Home  
11:55 to 12:15 PM**



# Vision Screen- age 3 Francis 2013 eye glasses at 18-months



St Elizabeth's Day Home/San Jose,CA

John Skandl D.O. (650) 255-3499  
ST. ELIZABETH'S DAY HOME  
350 St. Elizabeth Drive  
San Jose, CA 95128

Eye Screening Analysis

Vision Research Corporation  
211 Summit Parkway  
Birmingham, AL 35209

Francis Kai 10/14/13 Age 2 Trish (PK)

Ref: 2243 PFCA0007 C257

Refractive Errors	No Problems Indicated	Insignificant or MIC	Possibly Significant	Significant
Hyperopia (farsighted).....	✓			
Myopia (nearsighted).....				✓R
Astigmatism.....	✓			
Anisometropia (difference in eyes that can indicate or lead to amblyopia)				✓
<b>Alignment Errors</b>				
Esotropia (turned in).....	✓			
Exotropia (turned out).....	✓			
Vertical (hyper-hypotropia)	✓			
Opacities	✓			
Other (see Comment).....	✓			

**Detail**

Significant myopia, right eye.  
Significant anisometropia.

**Summary**

Significant problems indicated.

**Comment**

Child is at an important age for treatment.  
Prompt examination by an eye doctor is recommended.



**SUMMARY RESULTS**

- \_\_\_ No problems indicated.\*
- \_\_\_ Mild or insignificant problems indicated.\*
- \_\_\_ Possible or possibly significant problems indicated\*.
- ✓ Significant problems indicated\*.

Examination by a qualified eye care professional is strongly recommended. The parent should be aware that, after examination, a small percentage of those problems will prove to be of no significant concern (good news for parent and child), but most will be significant.

\* This analysis is based on a process that is screening in nature, and not diagnostic. Screening is intended to identify, with a reasonably high probability, subjects with various types of ocular problems who should seek the services of an eye care professional for examination, diagnosis, and corrective recommendation. There are eye problems that are not detected by this screening process, and there is no assurance that all problems that it is intended to detect will be detected. No screening process, including VRC's, is a substitute for examination by a qualified eye care professional, which in all cases is recommended by VRC.

# Hearing Screen – age 3 Lucia 2014 retracted ear drum-surgery 4-29-2015



## HearingFirst Screening

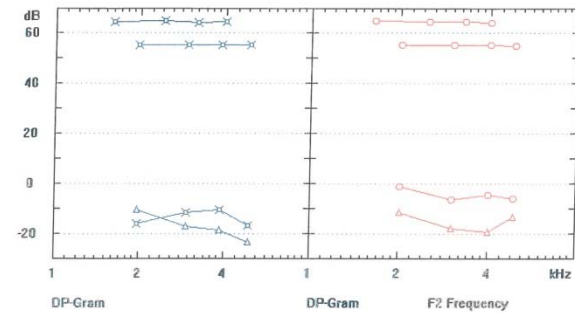
Patient: Carter-Giannini, Lucia Gender: Female  
 ID#: SEDH0066 12/10/2014 10:09:45 AM  
 Birth date: 3/14/2012 School:  
 Language: English Zip Code: Is this the School's Zip Code? No



Healthier Kids  
 Foundation  
 Santa Clara County  
 (408) 664-5114

Hearing screening does not replace a complete hearing test by an audiologist.  
 Hearing screening should be conducted regularly as hearing may change over time.

**Complete Hearing  
 Test Recommended**



**Result: PASS Ear: Right Date: 12/10/2014**

Protocol: 2-5 kHz Screen, 3/4 for Pass  
 Time: 9:13:40 AM

L1 (dB)	L2 (dB)	F1 (Hz)	F2 (Hz)	GM (Hz)	DP (dB)	NF (dB)	DP-NF (dB)	Result
64.3	55.1	3984	4875	4407	-6.2	-13.6	7.4	Refer
64.6	55.2	3281	3984	3616	-4.5	-19.3	14.8	Pass
64.7	55.4	2484	3000	2730	-6.3	-17.9	11.6	Pass
64.9	55.2	1641	2016	1818	-1.3	-11.5	10.2	Pass

**Result: REFER Ear: Left Date: 12/10/2014**

Protocol: 2-5 kHz Screen, 3/4 for Pass  
 Time: 9:16:12 AM

L1 (dB)	L2 (dB)	F1 (Hz)	F2 (Hz)	GM (Hz)	DP (dB)	NF (dB)	DP-NF (dB)	Result
64.7	55.2	3984	4875	4407	-16.8	-23.6	6.8	Refer
64.4	55.2	3188	3891	3522	-10.6	-18.5	7.9	Refer
64.8	55.3	2438	2953	2683	-11.5	-17.2	5.7	Refer
64.7	55.4	1594	1969	1771	-15.9	-10.6	-5.3	Refer

# Dental Screen- age 5 Sylvia high dental need-cavities



Healthier Kids  
Foundation  
Santa Clara County

Dear Parent/Estimado Padre:

Child's Name/Nombre del Niño: Sylvia  
Scdman Child's Age/Edad del Niño: 5

Your child received a free dental screening. This screening consists of a visual exam performed by a licensed dental professional. The screening did NOT include x-rays, cleaning, or fluoride treatment and DOES NOT take the place of a complete dental examination.

Su niño recibió un examen de detección dental gratuita. Este examen de detección consistió en un examen visual realizado por un profesional licenciado de odontología. La evaluación NO incluye radiografías, limpieza o tratamiento de fluoruro y NO TOMA el lugar de un examen dental completo.

If you need to apply for Medi-Cal or Healthy Kids for your children, then please call Healthier Kids Foundation at (866) 315-0135. Si usted desea aplicar para Medi-Cal o Healthy Kids para sus Niños, entonces por favor llame a Healthier Kids Foundation al (866) 315-0135.

Your child has received a dental screening with the following results:  
Su niño ha recibido un examen de detección con los siguientes resultados:

Based on the visual review by this dentist, your child needs follow-up care/Basado en la revisión visual por este dentista, su niño necesita atención de seguimiento  Yes/SI  No/No

1.  Routine Dental Care Recommended/Se recomienda Atención Dental de Rutina:

- \*Many dental insurances cover dental cleaning every 6 months
- \*Muchas seguras dentales cubren limpiezas dentales cada 6 meses

- A) Dental cleaning recommended/Se recomienda limpieza dental
  - B) Screen for cavities between the teeth (interproximal caries)/Se recomienda examinar por caries entre los dientes (inter proximal)
  - C) Sealants application recommended/Se recomienda aplicación de sellantes
  - D) Stained teeth, please evaluate for cavities (caries)/Manchas dentales, evaluar por caries
2.  Early Dental Care Needed/Cuidado Dental Temprano es Necesario
- A) Mild to moderate cavities (caries)/Caries leve a moderada
  - B) Gum disease/Enfermedad de las encías
  - C) Soft tissue lesion/Lesiones de tejidos blandos
  - D) Recent trauma/Trauma reciente
  - E) Ectopic eruption (tooth entering the mouth in an abnormal way)/Erupción ectópica (dientes saliendo en posición incorrecta)

3.  Urgent Care Needed/Se Necesita Atención Urgente

- A) Infection/Infección
- B) Pain/Dolor
- C) Severe cavities (caries)/Caries profundas

Dentist's Signature/Firma de Dentista: 


Date/La Fecha: 11/15/2015

Visit us at [www.kidsfor.org](http://www.kidsfor.org)

Funded by:



September 2014



**Questions?**  
**Thank You!**