MIST

MELBOURNE INITIAL SCREENING TEST

**What’s in the MIST booklet?**

1. A series of five large practice letters.
2. A picture of a cat which has been added as a reward and as a marker to separate the practice letters from the test letters.
3. A series of five test letters.
4. A picture of a smiley face, which has been added as a reward.

**How to perform the MIST**

# **Testing conditions**

1. Ensure the light source (for example window) will be behind the child.
2. Measure and mark a distance of three metres from where the child will sit.
3. Place a small table in front of where the child will sit.

# **Test procedure**

1. Sit the child behind the small table. This will ensure that the child does not bend forward. Place the choice card on the table.
2. The examiner, while sitting beside the child*,* presents a sufficient number of practice letters (that is, the large letters displayed before the cat) to ensure that the child has grasped the concept of matching.
3. Once the child has demonstrated the ability to match, the child’s left eye is covered.
4. The examiner moves to the measured distance of three meters from the child. Commencing from the front of the booklet the examiner shows the five practice letters, then the cat.
5. The examiner shows the five test letters and the smiley face. If the child can match three or more of the test letters, the test has been passed; if the child can match only two or fewer letters, the test has been failed.

**The smiley face has been added after the test letters as a reward and should be shown to the child whether the child passes or fails the test.**

1. Cover the right eye and repeat Step 5.

# **Recording of results**

Record the eye tested, the number of correctly identified letters and indicate whether this is a pass or fail, for example R=2 (fail), L=5 (pass).



If the child fails the MIST with one or both eyes, a specialist referral is necessary.

The Melbourne Initial Screening Test (MIST) has been designed to detect visual problems for referral purposes only and is not to be used as a diagnostic test.

Designed by the School of Orthoptics, La Trobe University, Victoria

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