

**Table C-8. Measures tested in studies included for Key Question 1C**

Study	Measure	Details About the Measure	Reported Reliability Data	Reported Validity Data	Reported Responsiveness Data
Finger et al. 2014 <sup>6</sup>	Modified Impact of Vision Impairment (IVI) questionnaire	Authors started with 37 items from the original IVI. Based on their analyses, they deleted 9 items that did not contribute to the identified 2 subscales (these subscales were the activities of daily living, mobility, and safety [ADLMS] and emotional well-being [EWB]). For both subscales, higher numbers indicate higher quality of life.	✓	✓	
Finger et al. 2014 <sup>7</sup>	Very Low Vision Instrumental Activities of Daily Living (IADL-VLV)	Adaption of several existing scales for ADL, but tailored to those with very low vision	✓	✓	
Bittner et al. 2011 <sup>2</sup>	Grating contrast sensitivity (GCS)	For each stimulus, the lines were horizontal, vertical, diagonal right, or diagonal left. Researchers determined each person's acuity threshold, twice per visit, and again over 1–2 additional visits. GCS gratings were 4 times larger than Grating Acuity Test gratings.	✓	✓	
Bittner et al. 2011 <sup>2</sup>	Pelli-Robson (PR) contrast sensitivity test	Standard contrast sensitivity test	✓		
McKnight and Babcock-Parziale 2007 <sup>8</sup>	FAST (Functional Assessment of Self-Reliance on Tasks), clinician-completed	Clinician-completed assessment of both pre-treatment and post-treatment abilities. There are 11 items, and a team of clinicians (consensus rating) completes it at both admissions to the program (pre) and discharge (post). Prior field testing indicated that FAST measures "functional ability."		✓	✓
McKnight and Babcock-Parziale 2007 <sup>8</sup>	FAST (Functional Assessment of Self-Reliance on Tasks), patient-completed	Patient-completed assessment of both pre-treatment and post-treatment abilities. There are 11 items, and patients were interviewed by telephone both before and after low vision rehabilitation		✓	✓
Roman et al. 2007 <sup>9</sup>	Light perception test: Full field flash test	FST2 delivered with Colordome desktop ganzfeld, Diagnosys LLC, Littleton MA that uses red, green, and blue LED illuminator arrays. Relative spectral content measured with the spectrometer USM200 from Ocean Optics, Dunedin FL. After dark adaptation for 45 minutes, patients were tested for their sensitivity to white light, blue light, and red light. Sensitivity is measured in decibels, with larger numbers indicating greater sensitivity.	✓	✓	
Kiser et al. 2006 <sup>10</sup>	Light perception test: Dark adaptometry	Researchers determined each person's threshold for detecting faint light (lower dB thresholds indicate greater sensitivity). Also they measured the amount of time it took to determine the person's threshold (shorter time indicates greater sensitivity). Data were captured over 4–5 visits per person at monthly intervals (1 test per visit).	✓	✓	

**Table C-8. Measures tested in studies included for Key Question 1C (continued)**

Study	Measure	Details About the Measure	Reported Reliability Data	Reported Validity Data	Reported Responsiveness Data
Kiser et al. 2006 <sup>10</sup>	Light perception test: Dark-adapted Humphrey perimetry	After being dark-adapted, patients fixated on a red LED in the middle of a 4 x 4 square. Researchers determined each person's threshold for detecting faint light over the visual field. Data were on a dB scale, with higher dB indicating greater sensitivity. Data were captured over 4–5 visits per person (monthly intervals), and there were 2 tests per visit. Data were reported in 3 ways: (1) rod-based sensitivity using blue-green stimuli (500 nm); (2) cone-based sensitivity using red stimuli (650 nm); (3) rod-cone sensitivity ratios	✓	✓	
Kiser et al. 2006 <sup>10</sup>	Light perception: Full-field flash test	2 flashes appeared (1 at maximum attenuation, the other to determine the patient's threshold for detecting faint light). Higher dB thresholds indicate greater sensitivity. Data were captured over 4–5 visits per person at monthly intervals (1 test per visit).	✓	✓	
Babcock-Parziale et al. 2005 <sup>11</sup>	VA-13	Patient-completed functional assessment of both pre-treatment abilities and post-treatment abilities. Patients completed VA-13 once, at 4–6 weeks after discharge from the program. It is a 13-item instrument measuring “the frequency of, and independence in, and satisfaction with performing specific tasks.” Prior field testing indicated that VA-13 measures “functional independence.” Subjects were asked about (1) current health (which is the post-test measurement) and (2) their memory about their health before treatment.	✓	✓	✓
Babcock-Parziale et al. 2005 <sup>11</sup>	FAST (Functional Assessment of Self-Reliance on Tasks), clinician-completed	Clinician-completed assessment of both pre-treatment abilities and post-treatment abilities. There are 11 items, and a team of clinicians (consensus rating) completes it at both admission to the program (pre) and discharge (post). Prior field testing indicated that FAST measures “functional ability.”	✓	✓	✓
Kiser et al. 2005 <sup>4</sup>	Pelli-Robson (PR) contrast sensitivity test, regular	Standard test, regular illumination in a fully lit room. Researchers determined each person's visual acuity and contrast sensitivity. Data were captured over 4–5 visits per person at monthly intervals (1 test per visit).	✓		
Kiser et al. 2005 <sup>4</sup>	Pelli-Robson (PR) contrast sensitivity test, dim	Standard test, dim illumination in a fully lit room. Researchers determined each person's visual acuity and contrast sensitivity. Data were captured over 4–5 visits per person at monthly intervals (1 test per visit).	✓		
Kiser et al. 2005 <sup>4</sup>	Pelli-Robson contrast sensitivity test, glare	Standard test, glare illumination in a fully lit room. Researchers determined each person's visual acuity and contrast sensitivity. Data were captured over 4–5 visits per person at monthly intervals (1 test per visit).	✓		

**Table C-8. Measures tested in studies included for Key Question 1C (continued)**

Study	Measure	Details About the Measure	Reported Reliability Data	Reported Validity Data	Reported Responsiveness Data
Stelmack et al. 2002 <sup>12</sup>	Modified NEI-VFQ-25 plus supplement	Authors started with 39 items (25 plus 14 supplement). 2 main modifications: Directions were modified to add consideration of low vision devices, and directions were repeated if necessary because veterans frequently forgot the instructions. Of 39 items, 5 were removed from the final analysis (3 involved driving questions 15, 16, and A10, and the 2 on vision-related health A1 and A2).		✓	✓

ADL=activities of daily living; dB=decibel; LED=light-emitting diode; NEI-VFQ-25=National Eye Institute Visual Function Questionnaire 25 item, VA-13=Veteran's Administration-13