



Project title

Visual Evoked Potential in dyslexics – before and after perceptual training

Investigator(s):

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Project objective:

We are now inviting children to participate in the project. The aim of the project is to compare the changes of Visual Evoked Potential (VEP) in dyslexics and to study the effect of perceptual training on VEP in dyslexics.

Project participants:

Children aged 7 to 8 years old who were diagnosed as dyslexia by psychologist without emotional or behavioral problems, such as attention deficit hyperactivity disorder (ADHD), mental retardation, neuromuscular disabilities and have not participated in any perceptual training.

Project procedures:

The participants will have different assessments including eye examination, visual perceptual tests and visual evoked potential measurement in the project. The duration of assessments is around 3 hours. Visual perceptual training will be only provided for the suitable participants. The duration of the training is 10 weeks. The selected participants will have bring-home training tools. Participants and his/her parents need to have total five lessons in our clinic for the bring-home training exercise in this period. Visual perceptual tests and visual evoked potential measurement will be conducted again after the training.

The first assessment will be in December 2010. Visual perceptual training will be delivered from January 2011 to April 2011 or from April 2011 to July 2011.

Participants benefit:

Participant will obtain an eye examination and a report of the visual perceptual tests after he/she completes all the project procedures.

Participation risk:

All the assessments, examinations, measurements and trainings are not invasive and will not cause any pain or harmful effect to the participant. Participant may ask for suspension at anytime during the project if he/she is tired or unwell, it will not lead to any punishment against him/her.

All the personal information and assessment results will not be disclosed to people who are not related to this study. Participant in the project is voluntary. You may contact the investigator, Ms Daisy Leung at 92014676 for any questions about this project.



Consent form

I _____ (Name of participant's parent or guardian) voluntarily consent to allow _____ (Name of participant) to participate in this study, which title is "**Visual Evoked Potential in dyslexics– before and after perceptual training**".

Please make a ✓ into the corresponding if you understand the item.

- I and my son/daughter participate in this project voluntarily.
- I read and understand all the information provided.
- I understand the possible risks of participating in this project.
- I have sufficient opportunity to raise questions about this project and got sufficient reply/replies.
- I understand my participation in this project will not lead me any personal benefit or remuneration.
- I understand that we can withdraw from this study at any time without giving reasons, and our withdrawal will not lead to any punishment against us.
- I understand that the results of the project will be published, but our personal information will not be disclosed to people who are not related to this study and will not be published individually.

Signature of Parent/Guardian

Date

Signature of investigator (Witness)

Date