

COMPUTER VISION SYMPTOM SCALE (CVSS17)

Final, cross-culturally adapted, English Version



THE QUESTIONS THAT FOLLOW ASK ABOUT HOW YOU FELT OVER THE PAST FOUR WEEKS WHILE AT WORK.*:

*If you normally wear glasses or contact lenses during most working hours, please describe how you felt while wearing this correction.

**While working on the computer for a while
(please circle the appropriate response):**

A2. Did the letters on the screen become blurry?

- | | | |
|----------------------|----------------|--------------|
| 1. Never | 2. Very Little | 3. Little |
| 4. A moderate amount | 5. Much | 6. Very Much |

A4. Did your eyes become tired?

- | | | | |
|---------------|------------------|-----------|-----------------|
| 1. Never | 2. Almost Never | 3. Seldom | 4. Occasionally |
| 5. Frequently | 6. Almost Always | 7. Always | |

A9. Did your eyes hurt?

- | | | | |
|----------|-----------|---------------|---------------|
| 1. Never | 2. Rarely | 3. Frequently | 4. Constantly |
|----------|-----------|---------------|---------------|

A17. After working on the computer for a while did your eyes become heavy?

- | | | | |
|----------|-----------|---------------|---------------|
| 1. Never | 2. Rarely | 3. Frequently | 4. Constantly |
|----------|-----------|---------------|---------------|

A20. Did you have to blink more than usual?

- | | | | |
|----------|-----------|---------------|---------------|
| 1. Never | 2. Rarely | 3. Frequently | 4. Constantly |
|----------|-----------|---------------|---------------|

A21. Did your eyes burn?

- | | | | |
|----------|-----------|---------------|---------------|
| 1. Never | 2. Rarely | 3. Frequently | 4. Constantly |
|----------|-----------|---------------|---------------|

A22. Did you have to strain to see well?

- | | | |
|----------------------|----------------|--------------|
| 1. Not at all | 2. Very little | 3. A Little |
| 4. A moderate amount | 5. Much | 6. Very Much |

A28. Did you feel like you were crossing your eyes?

- | | | | |
|----------|-----------|---------------|---------------|
| 1. Never | 2. Rarely | 3. Frequently | 4. Constantly |
|----------|-----------|---------------|---------------|

A30. Did the letters appear double?

- | | | |
|----------------------|----------------|--------------|
| 1. Not at all | 2. Very little | 3. A Little |
| 4. A moderate amount | 5. Much | 6. Very Much |

A32. Did your eyes sting?

- | | | | |
|----------|-----------|---------------|---------------|
| 1. Never | 2. Rarely | 3. Frequently | 4. Constantly |
|----------|-----------|---------------|---------------|

A33. After working on the computer for a while did lights bother you?

- | | | |
|------------------|-----------------|----------------|
| 1. Never | 2. Almost never | 3. A few times |
| 4. Several times | 5. Often | 6. Very often |

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OVER THE PAST FOUR WEEKS WHILE AT WORK, PLEASE INDICATE TO WHAT EXTENT YOU HAVE EXPERIENCED ANY OF THE FOLLOWING:

	1. None	2. Very little	3. Little	4. A moderate amount	5. Much	6. Very much
B7. Watery Eyes						
B8. Eye redness						

TO FINISH, PLEASE INDICATE TO WHAT EXTENT YOU AGREE OR DISAGREE EACH ONE OF THE FOLLOWING STATEMENTS*:

*If you normally wear glasses or contact lenses during most of your working hours, answer as if you were wearing them.

C16. At the end of my working day, my eyes feel heavy

- 1. Strongly Disagree
- 2. Slightly Disagree
- 3. Slightly Agree
- 4. Strongly Agree

C21. After working at the computer, I have to strain to see well

- 1. Strongly Disagree
- 2. Slightly Disagree
- 3. Slightly Agree
- 4. Strongly Agree

C23. I have to shut my eyes hard to relieve dryness when using these devices

- 1. Strongly Disagree
- 2. Slightly Disagree
- 3. Slightly Agree
- 4. Strongly Agree

C24. After some time at the computer, lights bother me

- 1. Strongly Disagree
- 2. Slightly Disagree
- 3. Slightly Agree
- 4. Strongly Agree

Note: This version replaces the preliminary, self-developed English version provided in the CVSS17 Spanish version development paper (<https://doi.org/10.1167/iavs.13-13818>). Clinicians and researchers interested in administering the English version of the CVSS17 must use the current validated version.