

: _____
: _____
: _____
#: 1 2 3 4

(Impact of Visual Impairment Scale, IVIS)

_____ , _____ (0, 1, 2,...).
_____ (. _____) . _____ .
_____ , _____ .
4 ...

- | | | | | | |
|----|---|---|---|---|---|
| 1. | | 0 | 1 | 2 | 3 |
| 2. | ? | | | | |
| 3. | ? | 0 | 1 | 2 | 3 |
| 4. | ? | 0 | 1 | 2 | 3 |
| 5. | ? | 0 | 1 | 2 | 3 |