

VISION REQUIREMENTS (PSL/44 – issue 12 dated 1st January 2012)

All PCN candidates and holders of PCN certification shall have natural or corrected vision satisfying the following minimum requirement:

For PCN Aerospace examinations, from 1st January 2011 the NANDTB recognise the Tumbling E Chart as a satisfactory near vision test and confirms no other near vision test shall be carried out as an equivalent test to demonstrate compliance, please refer to NANDTB 24.

The candidate shall provide documented evidence of satisfactory vision in accordance with the following requirements:

- A. Corrected or uncorrected near-vision acuity shall permit reading **a minimum of Times Roman N4.5 or equivalent letters** (having a vertical height of not more than 1.6 mm – see note 3) at not less than 30 cm.
- B. Colour vision (see note 1) shall be sufficient that the candidate can distinguish contrast between the colours or shades used in the NDT method concerned as specified by the employer.

Subsequently to certification, the tests of visual acuity shall be carried out at least annually. Records of tests shall be retained by the employer or responsible agency and provided to PCN upon request. Failure to do so will invalidate all PCN certification.

NOTE 1. All candidates and holders of PCN certification will be required to have had colour perception assessed by the Ishihara 24 plate test. The test is required only once since colour perception will deteriorate only under rare circumstances, such as if the individual develops diabetes. A record of test results should be retained and presented to BINDT upon request. **In the event that a colour perception deficiency, indicated by misreading any of the first 17 plates, is detected during the Ishihara test, a further 'trade test' is to be carried out by the employer to ascertain whether the detected colour perception deficiency affects the individual's ability to perform the NDT for which he is certificated.** This trade test is to be documented and the record of the test made available to BINDT upon request.

NOTE 2. BINDT accepts that a nominated official of an Authorised Qualifying Body, or a PCN Level 3 certificate holder, having documented proof of satisfactory training in the administration of the test, is medically recognised as competent to, and may therefore conduct such tests for candidates and holders of PCN certification. The PCN level 3 administering the near vision test must provide proof of appropriate training upon request by BINDT.

NOTE 3. Laminated hand held vision test charts are available from a number of suppliers, including the Institute of Optometry*. Further information may be obtained from the Certification Services Division of the British Institute of NDT.

*<http://www.ioosales.co.uk/html/practice/eye06B.html>

Forms overleaf may be used to record the results of near vision, colour perception and contrast tests.

RECORD OF VISION TESTS

Name of individual tested: _____ PCN number: _____

Address: _____

Telephone: _____ Email: _____

Employer: _____

| RESULT OF ISHIHARA COLOUR VISION TEST | | | |
|---|---|--|--------------------|
| Record the Ishihara test results, and indicate if an alternative (trade) test is suggested. | | | |
| Number of Ishihara plates correctly interpreted: (MINIMUM OF FIRST 17) | Record of Ishihara plates failed (the test administrator may, optionally, provide comment on the nature of colour perception deficiency): | | |
| RESULT OF COLOUR VISION TRADE TEST (WHERE NECESSARY - SEE NOTE 1) | | | |
| The employer should state the NDT methods and associated colours used by the employee: | | | |
| NDT METHOD | ASSOCIATED COLOURS | COLOUR DIFFERENTIATION | CONTRAST DETECTION |
| | | | |
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| RESULT OF NEAR VISION TEST | | | |
| (record the smallest text capable of being read). | | | |
| Near vision acuity shall permit reading a minimum of JAEGER 1 or Times Roman N4.5 or equivalent letters (having a height of 1,6 mm) at not less than 30 cm with one or both eyes, either corrected or uncorrected | | | |
| NOTE:- DO NOT SUBMIT EYE TEST IF RESULT IS NOT TO OUR REQUIREMENTS AS THIS WILL RESULT IN APPLICATION NOT BEING PROCESSED. | | | |
| CORRECTED | | UNCORRECTED | |
| Times Roman N: _____, or Jaeger number: _____ | | Times Roman N: _____, or Jaeger number: _____ | |
| DETAILS OF PERSON CARRYING OUT AND RECORDING ANY OF THE ABOVE TESTS | | | |
| Signature: | | Name of tester: | |
| | | Date of test: | |
| Organisation and telephone number (please use official stamp if available): | | | |