

**NDT Technician Vision Examination Report**

**European Standard EN 4179; Aerospace series – Qualification and approval of personnel for non-destructive testing; and National Aerospace Standard (NAS410) Certification & qualification of Non-Destructive Test personnel**

Clause 7.1.2 – Vision examination specify:

- The vision examination for all levels shall ensure that the applicant’s near vision and colour perception meet the requirements of Table 7.
- Near vision tests shall be administered annually and colour perception tests shall be administered at least every 5 (five) years.
- Snellen and Jaeger tests shall be administered by trained personnel designated by the Responsible Level 3 person or by qualified medical personnel.

Table 7 – Vision requirements

Examination requirements:

Near vision options (select one)	<input type="checkbox"/> Tumbling E in accordance with ISO 18490 <input type="checkbox"/> 20/25 (Snellen) at 40.64cm ± 2.54 cm <sup>1</sup> <input type="checkbox"/> Jaeger № 1 at not less than 30.48 cm <sup>1</sup>
Colour Perception	The individual shall be capable of adequately distinguishing and differentiating colours used in the process involved. <sup>2</sup>
<sup>1</sup> In at least one eye, natural or corrected. Simulated vision test and distance is not permitted. <sup>2</sup> Any limitations in colour perception shall be evaluated by the Responsible Level 3 person prior to certification and shall be approved in writing.	

Candidate name: \_\_\_\_\_

Driver License No: \_\_\_\_\_ State: \_\_\_\_\_

Near vision:                     Uncorrected                     Corrected

Left eye:                       Pass                                       Fail

Right eye:                     Pass                                       Fail

Colour vision:                 Normal  
     Abnormal (see examiner’s comments below)

**Vision examiner’s comments:**

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**Vision examiner's statement:**

I have conducted a vision examination of the candidate noted above and confirm that their near vision and colour perception requirements:

- meet the vision requirements of European standard EN 4179
- do not* meet the vision requirements of European standard EN 4179.

Qualified medical personnel:

Name: \_\_\_\_\_

Medicare Provider No: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

*or*

Designated trained personnel:

Name: \_\_\_\_\_

Designated by: \_\_\_\_\_

*(Responsible Level 3 person)*

Sign: \_\_\_\_\_ Date: \_\_\_\_\_