

Updated Patient Information

Name:		Nickname:	DOB:		
Address:			Apt/Lot#:		
City:		State:	Zip:		
Phone Number(s):					
Can we send you text remi	inders/notifications? 🏻	Yes □ No			
Email Address:					
(We will not send you junk	c mail)				
Marital Status:	Employer:		Occupation:		
Choose one of the followin	g:				
☐ I <u>do not</u> take any me	edications				
☐ I <u>will present</u> my me	edication list				
☐ Medication Updates					
In case of an emergency, p	olease contact:				
Name:		Phone:	Relation:		



Eye Health Assessment: Please choose from one of the 5 Options at the bottom of the page.

Evaluating the retina and optic nerve is important because our doctors are able to detect:

- Physical changes of the eyes: glaucoma, macular degeneration, retinal detachments, etc.
- Systemic diseases of the body: diabetes, hypertension, blood disorders, cancer, etc.

Dilation of Pupils

If you have Diabetes, Macular Degeneration, Retina conditions, Glaucoma, High Nearsightedness (>-6.00 D), or Floaters, then our doctors strongly recommend dilation every year.

Dilation allows our doctors to thoroughly evaluate the health inside the eye and is sometimes required to accurately determine the glasses prescription. These drops cause blurry vision for near work and sensitivity to light that last 3 to 5 hours. We can provide disposable sunglasses for you. Although most people are fine to drive after being dilated, some patients feel more comfortable having a driver available.

Optomap: Retinal Scan (\$45)

Our doctors can show you the inside of your eyes. These photos will remain in your permanent record for future reference. Insurance does not cover Optomap. It is generally not recommended for young children.

There is no blurry vision or light sensitivity, and it takes 3 minutes to complete. Sometimes Optomap reveals a problem that will ALSO require dilation for further evaluation.

Note: Optomap is an excellent diagnostic tool, but dilation is still recommended every 2 to 3 years.

Macula Scan (\$45)

The macula is the very center part of your vision in the retina. This screening test provides the doctor with a cross-section image of the macula. It helps evaluate for macular degeneration and swelling. Patients who have a family history of macular degeneration are especially encouraged to consider this scan.

Choose	one	ot	the	tol	lowing	:

	-	
□ Opt	tion 1 (Best): I <u>do</u> give permission for Pupil Dilation	and Optomap and Macula Scan (\$65)
□ Opt	tion 2 : I <u>do</u> give permission for Pupil Dilation <u>and</u> Op	tomap (\$45)
□ Opt	tion 3 : I <u>do</u> give permission <u>only</u> for Pupil Dilation (n	o additional fee)
□ Opt	tion 4: I <u>do</u> give permission <u>only</u> for Optomap (\$45)	
Mad	tion 5 : I <u>do not</u> give my permission to be dilated and cula Scan to be performed. I will not hold the doctor gnosed as a result of this omission (Not recommend	responsible or liable for any pathology not
Patient or	Parent Signature:	Date: