



Premier Eyecare of Cranberry, Inc.

Informed consent for ocular health screening

Routine eye exams and wellness screenings serve the purpose of identifying ocular health dangers as early as possible, enabling early intervention and more timely treatment. Examples include glaucoma, macular degeneration, diabetic changes, hypertensive changes, tumors, retinal tears, retinal detachments, and vitreous floaters. At Premier Eyecare of Cranberry, Inc., we offer state-of-the-art screening and diagnostic tools for our patients. These screenings apply to the well patient only and are recommended as part of your routine annual exam.

Our recommended option and standard for all ages is the dropless Optomap/ iwelness screening. As many of you know, the optomap allows us to image and evaluate the internal eye by a process similar to taking a picture. For patients 21 and older, we also add the iwelness, taking into account microscopic retinal structural details not visible by imaging or ophthalmoscopy. This enables us to compare your screening to a normative database and is also like taking a picture. The difference in information between these two would be somewhat analogous to a picture vs an MRI. These test are safe, simple, do not cause side effects of blurred vision or light sensitivity, and will not impair your ability to drive. The cost is \$39 and is not covered by routine vision insurance, but we believe it is a small annual price to pay for the most thorough health screening.

If the Optomap/ iwelness screening is refused, you also have the option of traditional dilation drops in order for us to view the internal eye. Dilation does cause the side effects of blurred vision and light sensitivity. These side effects can impair one's ability to drive, read or carry out normal daily activities for a few hours. Please check the appropriate line and sign/ date below.

_____ I consent to the Optomap/ iwelness screening.

_____ I refuse Optomap/ iwelness and consent to dilation drops.

_____ I refuse Optomap/ iwelness and dilation drops. I understand this severely limits the doctor's ability to assess the health of the eye.

Signature: _____ Date: _____

Print Name: _____