Eyedare Optometric

Contact Lens Evaluation Agreement

Welcome to Eyedare! Thank you for choosing us to look after your eyes. As a new patient to our office or a new contact lens wearer, here is some important information about our services.

Our doctors specialize in fitting soft, toric, hybrid, and rigid gas permeable contact lenses. They spend many hours at seminars every year keeping up with the latest technology in the fast-growing contact lens industry. Our close communication with the leading contact lens manufacturers means that you will be getting the most up to date information on the newest products available.

The fitting and evaluation process is different for every patient. An initial visit may be all that is needed for renewal of a contact lens prescription that is fitting properly and provides all day comfort. A thorough evaluation of your vision with contacts and the health of your eyes is a standard part of the renewal process. Our doctors specialize in fitting toric lenses and difficult to fit patients. For these patients, it may take a few visits before the prescription is finalized. This is to ensure that the contacts you purchase will provide the best visual acuity as well as all day comfort and leave the corneas healthy so that you are able to enjoy contact lens wear for years to come.

As the evaluation and fitting of contact lenses is a service in addition to a routine eye examination, there will also be a separate fee. The evaluation and fitting fee includes a prescription for one brand and type of contact lens. Additional fittings for multiple lens types will incur an additional fee.

These fees cover all follow-up visits relating to the fitting of contact lenses for a 90-day period following the initial eye exam. Follow-up appointments made after the 90-day period will incur a doctor consultation fee.

We hope this information has answered some of the questions you may have about the contact lens fitting and evaluation process. If you have any questions now covered here, please speak with any staff member or with the doctor during your eye exam. We look forward to helping you see clearly for many years to come!

I, the undersigned, have read and ur to the charges and policies herein.	derstand the agreement and my rea	sponsionnes and agree
Patient Name (please print)	Patient Signature	Date