

## Contact Lens Evaluation Agreement

If you are a current contact lens wearer, or are interested in wearing contact lenses, you will need a contact lens evaluation.

The contact lens evaluation fee is not included in the fee for your eye exam and is usually not covered by your insurance. The fee for your contact lens evaluation includes the initial visit and visits directly related to contact lens wear within a **90 day period**. This fee also includes a contact lens training class for new wearers. This fee is due in full at the time of the fitting evaluation and is not a refundable service once rendered.

The fees for the contact lens exam are as follows:

	<b>Previous Wearer</b>	<b>New Wearer</b>
<b>Conventional, spherical contact lenses</b>	<b>\$60</b>	<b>\$80</b>
<b>Toric/Astigmatism contact lenses</b>	<b>\$70</b>	<b>\$90</b>
<b>Bifocal/Monovision contact lenses</b>	<b>\$90</b>	<b>\$110</b>
<b>Gas Permeable contact lenses</b>	<b>\$110</b>	<b>\$130</b>

These fees are based on whether or not you have worn that type of contact lens before and the cost of any necessary trial lenses. Dr. Nguyen will examine the health of your eyes annually to ensure that you are a proper candidate for contact lenses.

You are responsible for scheduling and attending your follow up visit in order to finalize your prescription. Without a finalized prescription, you will not be able to order contacts.

By signing below you are acknowledging that you have read and understood our contact lens policy and agree that you will pay in full at time of service.

\_\_\_\_\_ I would like to have a contact lens evaluation today

\_\_\_\_\_ I do not want a contact lens evaluation today and I am aware that, without it, I cannot order contact lenses

**SIGNATURE** \_\_\_\_\_

Signature of Patient (or parent if a minor)

**Date** \_\_\_\_\_

\*\*\*THIS AGREEMENT WILL RENEW AUTOMATICALLY UPON YOUR ANNUAL CONTACT LENS EXAMINATION\*\*\*\*