

# Please Read Before Your Eye Exam

#### What is a refraction?

A refraction is the vision test that measures a patient's prescription for eyeglasses or contact lenses. The test involves looking through a device called a phoropter to read letters on a chart through lenses of differing strength. During this process, the eye doctor will ask you "Which is better...one or two?". This test is performed as part of a comprehensive eye examination or anytime that your vision drops significantly. The refraction allows for assessment of your current eye health and the detection of eye diseases.

## Why is it sometimes necessary?

Refraction is sometimes necessary depending on the patient's diagnosis and/or complaints presented. For example, if a patient is experiencing blurred vision or a decrease in visual acuity on the eye chart, a refraction would be needed to see if this is due to a need for glasses or due to a medical problem. A refraction is also necessary to prove to insurance the need for cataract surgery. We must prove that your vision cannot be simply improved with a glasses prescription.

### Who pays for the refraction?

Even though this is a vital test to the care of your eyes, the refraction is a non-covered service through your medical insurance. Our office charge is \$50.00 for the refraction, and you will be asked to pay at the time of your visit. If you wish to forego the refraction, please inform us **BEFORE** we begin doing any testing of your eyes. It is important to understand that if you decline, we may not be able to determine the cause of your decrease in vision.

#### Acknowledgement

I have read the above information and understand that the refraction is a non-covered service. I accept full financial responsibility for the cost of this service. I understand the co-pay, co-insurance, and deductible are separate from, and not included in, the refraction fee. You are only signing that you acknowledge our policy-not that you want the refraction.

Date

Date

Patient Signature\_

Patient Signature\_\_\_\_\_

| INFORMED CONSENT FOR DILATION OF EYES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
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| In order to more fully examine your eye health, it is necessary to use drops to dilate your pupils. This allows us to obtain a stereoscopic view of the retinas of your eyes, while at the same time affording study of a greater area of the retina than normally available through a non-dilated pupil; Retinal tears or detachments may be missed if only a non-dilated exam is performed. Although you may experience some light sensitivity and blurred vision of the eyes, the benefit far outweighs the risks of performing the procedure. Temporary sunglasses will be provided for your convenience. Your eyes may remain dilated for up to three hours. Some patients may have difficulty driving after the procedure. If you have any questions or concerns, please talk to the doctor about it during your exam. You are only signing that you acknowledge our policy-not that you want the dilation. |
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