



## PATIENT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zipcode: \_\_\_\_\_  
Telephone \_\_\_\_\_  
Home: ( ) \_\_\_\_\_ Birth Date: \_\_\_\_\_ Gender:  Male  Female  
Work: ( ) \_\_\_\_\_ Occupation: \_\_\_\_\_  
Cell: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_  
Emergency Contact#: ( ) \_\_\_\_\_ Name: \_\_\_\_\_ Relation: \_\_\_\_\_

### How did you hear about us?

Television  Radio  Mailer  Newspaper  Referred By: \_\_\_\_\_

If you wear contact lenses, are they:  Soft daily  Soft extended  Toric  Other

### Why do you want Laser Vision Correction?

Freedom from glasses and/or contacts  
 Intolerance to contact lenses  Appearance  Sports/Occupational Reasons

### Do you have any of the following eye problems past and/or present?

Keratoconus  Cataracts  Glaucoma  Retina  Ocular Herpes  Injury/Scar  
 Recurrent Corneal Erosions  Amblyopia (lazy eye)  Severe Dry Eyes

If you have had **Previous Eye Surgery**, please explain: \_\_\_\_\_

### Do you have trouble with glare or night time driving?

### Please check all ovals that may apply to you:

- Diabetes
- Hepatitis B
- Hepatitis C
- HIV/AIDS
- Keloid Scarring
- Auto Immune Disease  
(e.g. Rheumatoid Arthritis, Lupus, etc.)
- Pacemaker
- Tuberculosis

### Are you presently taking any of these Meds?

- Antibiotics
- Insulin
- Anti-Depressants
- Blood Pressure Meds
- Accutane
- Anti-anxiety Meds
- Cordarone
- Tranquilizer
- Sulfa Drugs
- Anti-Coagulants
- Heart Medication
- Imitrex
- Contraceptives
- Steroids

Please list all current medications: \_\_\_\_\_

### Please read the following and initial each line to indicate that you have read them:

\_\_\_\_\_ Laser Vision Correction is not recommended if you are pregnant, plan to become pregnant (with in the next 3 months), or are currently nursing.

\_\_\_\_\_ Laser Vision Correction is not a 100% predictable. Further treatment may be required.

\_\_\_\_\_ Most people require glasses for near-vision tasks beginning around the age of 40. Laser Vision Correction will not prevent this from occurring.

\_\_\_\_\_ You will not be able to drive home after Laser Vision Correction Surgery. You must arrange for transportation on the day of your procedure.

\_\_\_\_\_ When using our financing options, all applications must be submitted at least one day prior to you surgery day.

\_\_\_\_\_ Your pre-operative exam and surgery appointments may take up to three hours to be completed.

