

Contact Lens Agreement

After review of your ocular history and examination, your doctor will determine if you are an adequate candidate for contact lenses. The doctor will determine which contacts will be best suited for you based on prescription availability, fit, comfort, health compatibility, visual acuity, and cost.

FEES: Cost of a fitting or contact lens renewal is **\$99** for single vision(distance only) contacts. Cost of a fitting for monovision lenses is **\$150**. Cost of a fitting for multifocal lenses is **\$250**. The price includes the doctor's examination and trial lenses that will be ordered based on your needs and subsequent follow up visits for the first **90 days**. An additional fee of **\$50** for the subsequent **90 days** of follow ups will be charged if necessary. The fitting process can at times take several visits and you will need to be available to complete the fitting process within the first **90 days** to avoid additional cost to you. If you are a new contact lenses wearer, have not worn contact lenses in over 7 years, or have never completed a fitting, you will need to go through a one hour contact lens safety, insertion, and removal class that is an additional **\$175**. If you cannot insert and remove the lenses independently at least three times during this hour, you will need to take an additional class. Each additional class will be **\$75**.

PRESCRIPTION: Contact lens prescriptions expire one year from the date the fitting was initiated. We recommended updating your CLs yearly during your comprehensive eye exam. If you cannot, you need to be seen within the first three months of your full exam to ensure an up to date prescription. To maintain a contact lens prescription, an assessment fee depending on prescription type (see above) will be charged, this is **NOT** typically covered by health insurance. The **cost** of the lenses **varies** depending on material, prescription, and replacement cycle of lenses. We will make every attempt to fit you with the most economical lens that meets healthy guidelines and your individual needs.

COLORED LENSES: Colored contacts are not available in some prescriptions. Please talk to office staff prior to starting the process to see if colored lenses are available in your prescription.

EXCHANGES: Contact lens box(es) can be exchanged in cases of prescription changes only within 60 days of purchase. The box(es) must be unopened, unexpired, with no visible damage or writing in order to be exchanged.

COMPLIANCE: If a patient is abusing the use of contact lenses and putting their ocular health at risk, the doctor holds the right to revoke the contact lens prescription from the patient. Contact lenses are to be worn based on the doctors guidelines set by the manufacturer and the FDA.

I acknowledge a copy of my prescription will be available to me on paper or through the portal.

Name: _____

Acct # _____

Signature: _____

Date: ____/____/____