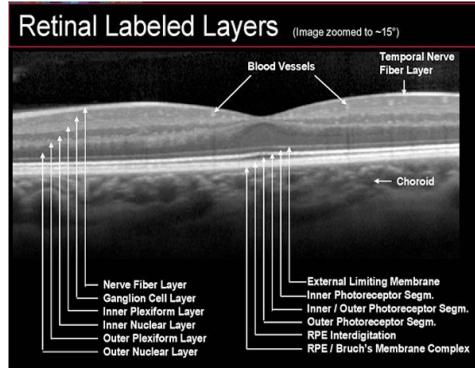


**PATIENT INFORMED CONSENT: PHOTOS/ DIGITAL SCANNING (OCT)/ DILATION/ VISUAL FIELD**

**Retinal OCT** is a non-invasive, painless technology often called the “MRI of the eye”. It aids in early detection of eye diseases such as diabetes, macular degeneration, glaucoma, and hypertension by obtaining a look at deeper retinal layers. Photos are also obtained for your records.

**Yes**, I want OCT & retinal photos for **\$39**.       **No**. I do not want OCT & retinal photos.



**Dilation** is the use of eye drops in your eyes for a more enhanced, broader examination of the retina, blood vessels, and optic nerve. Side effects of the dilation include sensitivity to light and blurry vision up close for up to six hours. Dilation shades are provided for light sensitivity. Most patients are able to drive while dilated. Dilation is strongly recommended if any of the following applies to you:

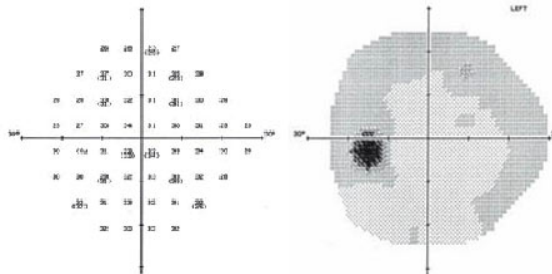
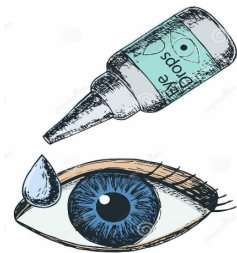
- **High Blood pressure**
- **Diabetes**
- **Taking medication**
- **Flashes of light or floaters**
- **History of Glaucoma**
- **Over the age of 65 years old**

**Yes**, I want to dilate my eyes for **\$20**.       **No**, I will not do a dilation.

**Visual Field** screening detects any defects in your field of vision. Results can indicate vision loss caused by glaucoma, certain tumors, retinal tumors, retinal defects, etc.

**Yes**, I will have the Visual Field Exam for **\$30**.       **No**, I will not do the Visual Field Exam.

**Yes**, I want both a dilation and Visual Field Exam for **\$40**.



\_\_\_\_\_  
Signature of Patient/ Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Patient/ Authorized Representative