

Contact Lens Fitting Agreement

In order to provide our patients with the highest standard of care, all patients are REQUIRED to have a comprehensive vision health examination by our doctors prior to contact lens fitting or contact lens evaluation. The contact lens fitting is for new contact lens wearers or existing contact lens wearers who need substantial changes in lens design for health or vision reasons. The contact lens evaluation is for established contact lens wearers to ensure that the health of the eye has not been compromised and no changes are necessary in the lens design or fit.

Contact Lens Fitting and Evaluation Fees:

Mini Fit:	\$80 (for established patients with a small design or material change)
Spherical Fit:	\$115
Toric Fit:	\$145
Custom Toric Fit:	\$175
Multi-Focal Fit:	\$175
Keratoconus Fit:	\$210

Contact Lens Evaluation: \$60

I understand that the contact lens prescription will be valid for one year and that an annual eye and contact lens examination will be required to update this prescription. I understand that wearing my contact lenses for more than the prescribed time or improper care increases my risk of infection, discomfort and poor lens performance.

Patient Name (Print): _____

Patient's/ Guardian's Signature: _____ Date: _____