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**CONTACT LENS EVALUATION**

Thank you for choosing Centennial Eye Associates for your eye care needs. We strive to provide

all contact lens wearers with a contact lens that will provide great comfort and clear vision. In order to

do this a contact lens evaluation must be performed ***every* year**. Contact lens patients require additional

testing and monitoring over and above what is done during a routine eye exam. This includes evaluating

the health of the eyes paying close attention to the cornea, eyelids, and conjunctiva, determining the

appropriate contact lens prescription and curvature, and examining the lenses on the eyes to ensure

proper alignment with the cornea and eyelids. Most vision plans view contact lenses as elective vision

correction and generally offer a discount toward the contact lens evaluation fee. Fees are determined

by the type of lens, complexity of the prescription, and overall eye health.

**Level 1**: $60 Spherical contact lenses.

**Level 2**: $100 Astigmatism corrective contact lenses.

**Level 3**: $150 Multi-focal/Bifocal , SV Duette and Gas Permeable contact lenses.

**Level 4**: $200 Bifocal-Toric, Duette Progressive and Bifocal Gas Permeable contact lenses.

**Level 5**: $600 Scleral and Other Specialty Contact lenses (May be covered by insurance).

**THIS ALSO INCLUDES**:

* Contact lens case and sample of solution
* Trial contact lenses
* 90 days of follow-up care (there is a follow-up fee of $30 once outside of 90 days)

**PLEASE CHECK BELOW**

\_\_\_\_\_\_ YES… I would like a contact lens evaluation today in order to update my contact lens prescription

and have the ability to purchase contacts for the next 12 months. I understand that the fitting must be

paid at the time of service.

\_\_\_\_\_\_ NO… I do not want a contact lens evaluation today and I understand that I will not be able to

purchase contacts without an updated contact lens prescription.

**Patient Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Patient Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Today’s Date** \_\_/\_\_/\_\_\_\_

If you have any questions, please do not hesitate to ask!