

**NEW ALBANY VISION CLINIC
484 W BANKHEAD ST
NEWALBANY, MS 38652
662-534-0101**

PATIENT NAME: _____

CONTACT LENSES: PROFESSIONAL FEE POLICY

- Our routine eye exam includes a complete ocular health evaluation and measurement for glasses prescription. Our charge for a routine exam ranges from \$115-138. The fitting and prescribing of contact lenses is not a part of a routine exam. **This is an additional service for which there is a separate fee and is due whether you order contact lens or not and is non-refundable. Our fitting fee ranges from \$35-\$105.**
- **What is a contact lens fitting?** The size, material, curvature, and power of the contact lens must be specified to the characteristics of your eye. To do this, your doctor must take additional measurements and do additional evaluations beyond what is required for the prescription of eyeglasses. The curvature of the front of the eye is measured and the eye is evaluated for suitability to wear contact lenses. Following this, your doctor will often recommend a pair of trial lenses. The vision and fit of the lenses are then evaluated and, if necessary, adjustments are made. This entire process is called the **contact lens fitting**. A proper contact lens fitting is the only way to establish your correct contact lens prescription, even if you have already worn contact lenses previously.
- In most cases, a one-week follow-up visit is required before your final contact lens prescription can be released. If you are trying bifocal, RGP, or astigmatism lenses, the fitting process typically involves more visits with the doctor. These follow-up visits are included at no additional charge if you make and keep your scheduled appointments.
- **Our doctors will work with you to finalize the fitting process for up to 60 days after your initial exam. If you fail to return for your follow-up visit within 60 days, then you will be charged \$35-\$105 for visit(s) needed to finalize your prescription. If you fail to return for your follow-up visit within SIX MONTHS, you may be required to have a new eye exam before a contact lens prescription can be released.**
- Only routine contact-lens follow-ups are included in your original exam fee. You will be charged for all other visits unrelated to the original fit of the contacts, such as infections or trauma. You may be charged if you decide to change brands of contact lenses if this involves a new lens evaluation.
- It is the law that contact lens prescriptions are valid for **ONE** year. We cannot dispense lenses to you, trial or otherwise, after your prescription has expired. You should have annual exams to monitor the health of your eyes.
- Contacts are not a substitute for glasses. All contact lens wearers should have back-up glasses! Proper eye protection should still be worn when necessary.

By my signature, I acknowledge that I have read and understand the terms of this contract lens fee policy, I know that if I do not return for recommended follow-up visits, I will not have a final contact lens prescription and may be charged an additional refitting fee.

X _____ Date _____

Signature of Patient or Legal Guardian

Effective 10/16/2020 we are required to give you a copy of your **FINAL** contact lens prescription.

If at any time you request your prescription be sent by fax or email **it will be sent through a non-secure fax line or via unencrypted email**. This means someone may potentially obtain information (name, address, phone number and dob) printed on the prescription without your knowledge.

By my signature, I acknowledge that I have read and understand the above terms of having my prescription sent electronically.

X _____ Date _____

Signature of Patient or Legal Guardian