

Name _____ Date _____

Address _____ City/State/Zip _____

Cell Phone _____ Home Phone _____ BusinessPhone _____

Email Addr: _____ Date of Birth _____ Occupation _____

If you are under 18: Parent's Name _____ BestDaytimePhone _____

Person to contact in case of an emergency _____ Phone _____

Marital Status _____ Gender _____ How did you hear about our office? _____

Single _____ Male _____ Phone book _____ Web site _____ Search Engine _____

Married _____ Female _____ Insurance Co. _____ Friend/Relative _____ Doctor _____

Other _____ Their Name _____

Would you like to be notified via email of office promotions and events? Y N

Primary Insurance: BC/BS _____ Medicare _____ United _____ Other _____

Please Present Your Insurance Card to the Front Desk

Please Read and Sign Both Paragraphs

Health Insurance Portability and Accountability Act of 1996(HIPAA) requires that we make available to you our Notice Of Privacy Practices. If the patient is a minor, the parent or legal guardian will sign on their behalf. I acknowledge that a copy of The Notice of Privacy Practices has been made available to me.

PatientName _____ Signature _____ Date _____

I authorize the release of any medical information necessary to process my claims and request payment for medical services are issued to Chapel Hill Eyecare. I further understand that reasonable effort will be made to collect the amount due. However, I am ultimately responsible for the timely payment of this account.

Signature _____ Date _____

Why your doctor uses eye dilation:

To dilate your eyes, your optometrist uses drops to cause your pupils, the round black center of each eye, to open as if a window were opening to better view the structures inside the eye. Glaucoma, macular degeneration, diabetic retinopathy, cataracts, tumors, vascular disease and retinal detachment are all conditions that affect your vision and are just a few of the many things your doctor looks for during a dilated eye exam. The current drugs used to dilate are fast acting with dilation usually occurring in 10 to 30 minutes and lasting from 4 to 6 hours. Dilation is completely painless and most people experience few, if any, side effects. Dilation may cause you to experience glare, blurring of near vision for 2 to 4 hours and some sensitivity to light. Dilation provides you with the most thorough eye health examination possible and allows for early detection of eye diseases, which could mean the difference between seeing and not seeing. You and your eyes will be healthier for it.