CONTACT LENS QUESTIONNAIRE: 1. Do you currently wear contact lenses? \square Yes \square No If No, please skip this section. 2. What type of contact lenses are your currently wearing? ☐Rigid ☐Soft 3. If you are wearing soft contact lenses what is your current modality of wear? □ Daily disposable □ 2week disposable □ Monthly disposable □ Quarterly replacement Other 4. How old is your current pair of contact lenses? 5. Are you satisfied with the vision and comfort of your current pair of contact lenses? ☐ Yes ☐ No 6. Would you like to: □Continue with what you have □Change to: 7. Do you prefer clear or colored contact lenses? □ Clear □ Colored □ Both 8. Please check all that apply to your contact lenses: ☐ Feel less comfortable in the afternoon ☐ Feel painful after insertion □ Are not as clear as I would like □ Feel irritated and/or eyes become red after wearing for a few hours

What is a contact lens fit?

A contact lens fitting is an additional, separate portion of a comprehensive eye examination. As contact lenses are most often an elective addition to a glasses prescription, most insurance companies do not cover contact lens fits. Any contact lens fitting fees that are not covered by insurance will be the responsibility of the patient. At Vision Arora, our contact lens fit fees range from \$95 to \$250 depending on the type of contact lens being fit. The contact lens fitting fee pays for the initial fitting and 2 follow ups visits within 30 days. Contact lens fits do not include the actual supply of contact lenses. Contact lens prescriptions expire after 1 year. Any concerns requiring a refitting or power adjustment for your contact lenses after 30 days from your exam date while be charged after the grace period is over.

9. Please describe any concerns you have with your contact lenses:

What is included in a contact lens fit?

- Determination of candidacy for contact lens wear
- Determination of contact lens prescription based on glasses prescription
- Evaluation of tear film and cornea
- Evaluation of contacts on the eye
- Topographical analysis of cornea if necessary

- Insertion/removal training for first time wearers
- Contact lens trials until determination of final prescription
- Travel size contact lens solution and case

I have read and agree to the terms of the Contact Lens Fit Agreement.

Printed Name Signature Date