



CONTACT LENS FITTING FEES

We want to thank you for considering a contact lens fitting with the doctors of Whitson Vision and want you to understand what is involved with a contact lens fitting. If you have any questions, please do not hesitate to ask.

On the day of your examination, if needed and time permitting, an optician will instruct you on insertion and removal of the lenses. If this is not possible, you will be given a return appointment to meet with one of the opticians for this instruction session. After receiving these instructions, you will wear the lenses for one to two weeks and return for a follow-up examination to evaluate the fit and prescription. If you are a previous wearer and no changes have been made to the fit, you will be free to purchase your prescribed lenses the day of the examination and will not need to go through the “trial” phase.

Below are the categories of Fitting Fees. Your fees will be determined by the physician, are **due at the time of the fitting** and are **non-refundable**. If you decided to “up-grade” to a different category (i.e. monovision to bifocals) after the initial visit, additional fees will be added. Fees do not include the price of the contact lenses.

Fitting Fees are as follows:

Renewal of contact lens fit and power, soft or gas perm (This re-validates your prescription for one year.)	\$40.00
Soft:	
First-time contact lens wearer, Change in brand or type of lens, Refit because of unknown contact lens specifications, Refit because of poor fit or poor visual acuity	\$75.00
Soft Toric or <u>Standard</u> Gas Perm:	
First-time contact lens wearer, Change in brand or type of lens, Refit because of unknown contact lens specifications, Refit because of poor fit or poor visual acuity Monovision	\$95.00
Specialty Contact Lenses:	
Gas perm toric Soft or gas perm bifocal Keratoconus Post corneal surgery Other corneal deformities	\$200.00

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NOTICE: Fitting fees cover up to two months of follow-up care. Follow-up care is vital to determine the fit of the lens and to protect the health of your eyes. **If you elect to forego the follow-up care and return beyond the initial two month period, you will be charged a fee of \$40.00.** You must have follow-up care in order to purchase contact lenses, unless otherwise authorized by the doctor.

The price of lenses will vary depending on type and prescription. Some types of contacts are not available in complimentary trials, i.e. gas perms, planned replacement or daily wear soft lenses. These lenses must be purchased. They may be returned or exchanged as described in the next paragraph. Most disposable contacts are available in complimentary trials.

Contacts must be paid for in full at the time of dispensing. Changes in the lenses can be made within the first two months. If within the two-month follow-up period, you feel contacts are not for you, we will credit your account if gas perm contacts are returned in good condition, or if soft lens boxes are not expired and are unopened, or if they are in good condition and in the original bottles. You may use this credit for other optical purchases for yourself or a family member. **THE FITTING FEE WILL NOT BE REFUNDED OR CREDITED.** _____ (*initial*)

Fairness to Contact Lens Consumers Act: This act went into effect February 4, 2004. As stated by this Act, you are entitled to a copy of your contact lens prescription once the prescription is finalized by the examining doctor. Receiving a trial lens **IS NOT** a finalized prescription. A finalized prescription is determined at the follow-up appointment after you have been wearing the trial lenses. **Contact lens prescriptions are valid for one year, per Indiana state law.**

I have read and understand the above information and agree to the terms set forth in this agreement. I also acknowledge that I have had all my questions answered.

Signature of patient or legal guardian

Date