



Eye Health Exam Procedures

Retinal Photography Screening

This procedure is a high resolution digital screening photograph of your retina which will help Dr. Eickhoff document, review, and compare your retina each year to catch any potential problems at early stages. It is also a great way to document a baseline of your child's eyes at a young age for future comparison.

Retinal Photography Screening helps with the detection of:

- Macular Degeneration
- Glaucoma
- Retinal Hemorrhages
- Diabetes
- High Blood Pressure
- Vascular Disease

Your insurance company will only pay for retinal photography AFTER eye disease is discovered. In order to perform a screening test for early detection, there will be an out of pocket cost of \$35.

- YES, I would like the Retinal Photography Screening for \$35**
- NO, I do not wish to have the screening procedure performed**

Dilated Fundus Examination

The purpose of dilating your pupils is to perform a more thorough examination of the health of your retina by viewing around the iris, or colored area of your eye. This allows Dr. Eickhoff to access the peripheral retina, which would otherwise not be visible. Secondly, dilating drops can relax your focusing muscles and in certain cases detect hidden vision problems, which would not have otherwise been detected. You may experience some mild side effects after dilation including blurry vision, light sensitivity, nausea, dry mouth, and burning upon instillation. These effects can last up to 6 hours. If you should experience the above symptoms including decreased vision, halos around lights, foggy vision, brow/headache, redness, or pain lasting longer than 6 hours call or return to our office immediately. Disposable sunglasses will be provided for your comfort and safety. Dr. Eickhoff recommends this procedure for:

- ALL first time patients
- High Prescriptions
- Over 55 years of age
- Anyone experiencing Flashes of Light, Floaters or Headaches
- Diabetes, Hypertension, or other Systemic Disease
- Cataracts, Glaucoma, Macular Degeneration, or Retinal Conditions
- Children under 12 years of age

This procedure is included in a Comprehensive Eye Exam and therefore will be performed at no additional cost to you.

- YES, I would like to have my eyes dilated today.**
- NO, I would not like to have my eyes dilated today, but will schedule to return within 30 days at no charge.**
- NO, I would not like to have my eyes dilated. I understand the risks involved and decline dilation at this time.**

Patient/Guardian Signature: _____ Date: _____