

ABOUT YOU

Full Name: Mr. Mrs. Miss. Ms. Dr. Prof. _____

Was your last eye exam in our office? ☐ Yes ☐ No

If not, what is the date and location of your last exam: _____

Welcome back! Since your last exam with us, have you had any changes to your:

Medications? ☐ Yes ☐ No

Please list: _____

Your health history? ☐ Yes ☐ No

Please list: _____

Your **family** health history? ☐ Yes ☐ No

Please list: _____

WORK

Special visual demands for work:

☐ Computer Lenses ☐ Safety Glasses ☐ Extra magnification

☐ Other _____

Hours spent on computer per day: ☐ 0-4 ☐ 4-8 ☐ 8+

☐ Reading/Writing
 ☐ Golf
 ☐ Swimming
 ☐ Cycling
 ☐ Fishing/Boating
 ☐ Travel
 ☐ Knitting/Sewing
 ☐ Motorcycles

VISION

Are you happy with your vision?

Do you currently/are you supposed to wear **glasses**?

Would you like to get new glasses this year?

Have you worn **contacts** before?

Are you interested in **contacts** this year?

Are you interested in **laser vision correction**?

Are you interested in **eliminating** the need for glasses or contact lenses **non-surgically**?

Y N
☐ ☐
☐ ☐
☐ ☐
☐ ☐
☐ ☐
☐ ☐
☐ ☐

Please mark any symptoms you are experiencing:

☐ Blurred Vision
 ☐ Night Glare
☐ Eyestrain
 ☐ Double Vision
☐ Eye Pain
 ☐ Loss of Side Vision
☐ Light Sensitivity
 ☐ Floaters
☐ Headache
 ☐ Flashes of Light
☐ Poor Night Vision
 ☐ Total Loss of Vision

Other _____

DRY EYE SCREENING

Please mark if you are experiencing any of the following **comfort issues**:

☐ Redness
 ☐ Itching
 ☐ Soreness/Irritation
 ☐ Dryness/Grittiness
☐ Burning
 ☐ Watering
 ☐ Discharge
 ☐ Pain

Please rate the **frequency** of each symptom:

0= Never 1= Sometimes 2= Often 3= Constantly

...and the **severity** of each symptom:

0= None 1= Tolerable 2= Uncomfortable 3= Bothersome 4= Intolerable

Dry/Gritty/Scratchy
Soreness/Irritation
Burning/Watering
Eye Fatigue

0	1	2	3

0	1	2	3	4

How motivated are you to pursue treatment for dry eye symptoms? (circle response)

☐ I have no symptoms
 Not at all, I was just answering the questions.
← 0 1 2 3 4 5 6 7 8 9 10 →
Very! Give me all the tests and treatments!