



Contact Lens Wear Notice:

At Specialty Eyecare Group we strive to provide you with the clearest vision and safest contact lenses for your eyes. Washington State law requires that you receive a contact lens evaluation to minimize potentially serious complications related to contact lens wear.

Services rendered for contact lens evaluation are not included in an eye health evaluation and vision assessment. The contact lens service fees in this office reflect the expertise and time of the employees and physicians overseeing your care. These fees are outlined on the right.

Please Sign and Date One of the Following:

*I **CONSENT** to have a contact lens evaluation. I have read and understand the office policies and agree to the contact lens service fee schedule.*

Print Name (Parent or Guardian)

Patient Name

Signature (Parent or Guardian) Date

*I **DECLINE** to have a contact lens evaluation at this time but acknowledge the office policies and contact lens service fee schedule. I understand that I will not receive a contact lens prescription at this time.*

Print Name (Parent or Guardian)

Patient Name

Signature (Parent or Guardian) Date

Contact Lens Service Fees:

Fees include the assessment of current lenses for fit, power, and health.*

- ✓ Up to 4 follow-up appointments pertaining to the contact lens evaluation are included within the first 90 days.
- ✓ Additional follow-up appointments pertaining to the contact lens evaluation are \$100 for the initial 90 days.
- ✓ In the event that a contact lens evaluation is not successful the fees for services rendered are not refundable.

If you wear standard soft lenses the fee is one of the following:**

1. Spherical: \$175.00
2. Toric (for Astigmatism): \$225.00
3. Multi-Focal or Spherical Mono-vision: \$250.00

If you wear RGP/Custom Lenses the fee is one of the following:**

Initial Fit or Refit (Rx, Style or Design Change):

1. RGP or Custom Soft Spherical: \$250.00
2. RGP or Custom Soft Toric or Multi-Focal: \$400.00

If you have specialty contact lens needs due to Keratoconus, other medical issues or complex contact lens fitting issues, there is a separate fee schedule. Please notify us if you know that you wear specialty contact lenses.

* If you are a new contact lens wearer there will be a **\$25.00** training fee.

** If your spherical prescription is +/- 8.00 or your cylindrical prescription is over -2.50 your contact lens will be considered a Custom Lens.

The cost of the contact lens supply is not included in the Service Fees.