

DR. GREG WACASEY, O.D.

How will you be paying today? Cash ___ Credit Card ___ Insurance ___

NOTE: WE ARE NO LONGER ACCEPTING CHECKS

Name: _____ Birth Date: ___/___/___ Age: ___

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Employer: _____ Occupation: _____

Primary Care Doctor _____ Doctor's phone # _____

Name of Insurance: _____

Social Security #: _____ - _____ - _____

Responsible Party for Minors _____ Social Security # _____

To whom information can be released: _____

Do you wear glasses? **Yes / No** Contacts? **Yes / No** Full-time / Part-Time

Are you interested in contacts? **Yes / No**

Date of Last Eye Exam: _____

Your Reasons for Visiting Our Office Today: Please Check

___ General Checkup ___ Lost or Broken Glasses or Contacts

___ Blurred Vision ___ Near ___ Distant ___ Both

___ Headaches ___ Pain ___ Glare ___ Itching ___ Watering

Your General Health and Ocular Health: Please Check if these apply to you

___ High Blood Pressure ___ Diabetes

___ Respiratory Problems ___ Cancer

___ Multiple Sclerosis ___ Arthritis

___ Heart Disease ___ Allergies

___ Cataracts ___ Glaucoma

___ Eye Injuries/ Surgeries Specify: _____

___ Other Specify: _____

Do any of your family members have any of the above conditions? Yes / No

If yes, Specify: _____

Are you currently taking any medications? Yes / No

If yes, Specify: _____

(Please include all prescriptions, vitamins, eye medications and over the counter)

Are you allergic to any medications? Yes / No

If yes, Specify: _____

How did you hear about us? Please Check

Welcome Wagon ___ Phone Book ___ Newspaper ___ Friend/Family ___ Employee ___

PAYMENT DUE WHEN SERVICES ARE RENDERED. PROFESSIONAL'S FEES ARE NON-REFUNDABLE. EVEN WHEN THERE IS NO CHANGE IN YOUR PRESCRIPTION, GLASSES EXAM FEE DOES NOT INCLUDE A CONTACT LENS PRESCRIPTION. UPON REQUEST, A FINAL CONTACT LENS PRESCRIPTION WILL BE RELEASED AFTER NECESSARY FOLLOW-UP VISITS.

Signature: _____ **Date:** _____