

**Columbia Vision Center (CVC)
Contact Lens policy**

It is our intention to provide our patients with the best possible contact lens services and materials available. Therefore, we are continually updating our lens inventory so that we can provide you with the latest products in contact lenses and solution. In order to maintain quality care, we strongly believe that providing our patients with all pertinent information regarding the procedures and fees relating to contact lenses before services are rendered is in the best interest of everyone.

We recommend a full eye exam yearly. The contact lens fitting is NOT part of a full eye health exam. The tests performed during fittings are beyond those tests done during an eye health exam. These tests include checking for dry eyes and allergies, and taking other corneal measurements. The corneal-contact lens relationship is evaluated and the proper lens power is determined while wearing the lens. Contact lens training is also included in this fitting fee.

Frequency of contact lens fittings:

- 1 Every 24 months or as recommended by the doctor
- 2 If patient wishes to change to a different contact lens brand
- 3 By Washington State Law, the fitting must be done within 6 months of the full eye exam.

Fees for contact lens fitting:

- 1 \$70 spherical contacts
- 2 \$80 soft toric or rigid gas permeable
- 3 \$100 bitoric, multifocal, specialty fit, multiple brands
- 4 \$50 if we have tested for and dispensed samples but you then wish to abandon the fitting process

Contacts lens follow-up:

- 1 Includes 3 visits, if needed. The first follow-up should be within 30 days of contact lens dispense.
- 2 Your fitting period started on _____ (today's date). All follow-up visits must be completed within 2 months of this date. You will be responsible for additional contact fitting fees (see schedule above) if more time is needed but cannot extend past 6 months of this initial fitting.

Miscellaneous:

- 1 A contact lens prescription, by Washington State Law, does not exist until the doctor has seen the prescribed contact lenses on your eyes and deems the fit and vision to be adequate. Please be sure to wear the contacts into the follow-up appt.
- 2 By Washington State Law, the doctor can only give out prescriptions for contacts that have been evaluated on your eyes. No other brands may be substituted when writing this prescription.
- 3 It is possible for a separate medical eye condition to arise during the contact lens fitting period. If the doctor deems this to be the case, you are financially responsible for those office visits. We will do our best to assist in verifying benefits under your medical insurance, if applicable.
- 4 You have 2 weeks to pick up contacts after notification. After this time period, they will be returned to the manufacturer and you will be responsible for a restocking fee of \$10.
- 5 Contact lenses are non-refundable. Fees for services are non-refundable.

I have read and understand the above contact lens policy for Columbia Vision Center.

Signature of patient _____

Print name _____ Date _____