

Dena C. Hall, O.D.  
Eric J. Hall, O.D.

David J. Jennings, O.D.  
Noelle E. Tiberi, O.D.



148 Social St., Woonsocket, RI 02895  
12 Smith Ave., Greenville, RI 02828  
1265 Reservoir Ave., Cranston, RI 02920

## SOFT CONTACT LENS FITTING FEE AGREEMENT

Patient Name: \_\_\_\_\_

Chart #: \_\_\_\_\_

To make your contact lens experience as pleasant and informed as possible, we would like to explain our contact lens fitting procedure. A contact lens (CL) prescription is different from a glasses prescription. A CL is a medical device that rests on the cornea of your eye and requires proper fitting on the eye to create a healthy environment. If you are having an eye examination and wear CL's, our professional staff will be evaluating your current CL's to determine how safe and effective they are. This fitting and assessment are above and beyond your eye examination and will require an additional fee.

### NEW FIT:

If this is the first time that you have been fit with CL's then this is considered a new fit and you will be charged a CL fee accordingly. The fitting fee will be determined by the doctor according to the type of CL's you are in, as listed below. This fee covers the CL fit and any follow-ups required for four (4) months. A final prescription will be written based on the trial lenses dispensed or another fitting fee will be applied. All CL fitting fees are due before any trial CL's or CL prescription will be released. The initial CL fitting appointment will require measurements to determine the proper power and fit of the CL's. If you have never worn a contact lens, you will need a contact lens training session with one of our technicians.

- New Soft Spherical Fitting Fee: \$100
- New Soft Toric Fitting Fee: \$125
- New Soft Multifocal Fitting Fee: \$150
- New Soft Monovision Fitting Fee: \$125

### REFIT:

Patients will be responsible for a CL refit fee if they currently wear CL's and either request or require a change in the brand of CL's, or do not know their CL prescription information or wear CL's and are new to the practice. The CL refit fee in the amount of \$50 covers the new measurements, selection of new CL's, and any follow-ups required for up to four (4) months. At four months a final prescription will be written based on the trial lenses dispensed if you fail to return for follow up care.

### YEARLY ASSESSMENT:

Patients who currently wear CL's and are current patients of Vision Associates who do not require any changes will be charged a small fitting fee of \$50. This fee is required in order for the doctor to assess that the patient's eyes are still healthy enough to wear contacts and that the CL's they are wearing are performing the way they should.

I have read this contact lens fitting fee agreement and I understand the fitting procedure. I understand that it is my responsibility to return for contact lens dispensing and follow up evaluations of my contact lenses at the intervals recommended by this office. I agree to pay the contact lens fitting fee. I understand that the cost of my exam today and my final contact lens supply is not included in this contact lens fitting agreement.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Patient Signature