



## NEWCASTLE VISION CLINIC ANNUAL RETINAL CHECK

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Yearly retinal checks are a very important part of the exam to ensure healthy eyes. Doing so enables the doctor to examine the eyes for cataracts, glaucoma, and other conditions that may result in loss of vision. In some cases early signs of diabetes, arteriosclerosis, and high blood pressure can also be detected. The doctor highly recommends yearly checks to screen for any retinal holes, tears, detachments, and other diseases.

**There are two options to choose from:**

### **A) DILATED FUNDUS EXAMINATION**

In order to dilate the eyes, drops are instilled which widen the pupils within 20-25 minutes. Your vision, especially for reading, will likely become blurred temporarily for up to 4-5 hours after the exam. Dilation also has a tendency to make your eyes more sensitive to light during this period. Disposable sunglasses will be available to ease the glare from the sun.

### **B) OPTOMAP RETINAL EXAMINATION**

An Optomap Retinal Exam is another option that uses the latest technology in eye care. A view of approximately 82% of your retina is captured in a single image capture. Images taken will be reviewed with you by your evaluating doctor. An Optomap Retinal Exam is fast, painless, and does not require dilating eye drops. Annual Optomap Retinal Exams have the benefit of keeping a snap shot in time to compare to those taken in future exams.

Your doctor recommends the Optomap Retinal Exam as an integral part of your eye exam today. If not covered by your insurance plan, the cost of the Optomap Retinal Exam will be \$39.

### **PLEASE CHECKMARK ONE OF THE FOLLOWING OPTIONS:**

\_\_\_\_\_ I would like to have a complete **Dilated Examination**.

\_\_\_\_\_ I would like to have a complete **Optomap Retinal Exam**.

\_\_\_\_\_ I decline both and understand that I am releasing Newcastle Vision Clinic from any liability.

\*Please be aware there are certain eye and health conditions that require both dilation and Optomap. The doctor will inform you during the exam if this is the case.

I have read and understand the above information.

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

\_\_\_\_\_  
Date

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