

Your eyesight is priceless and we are here to protect it!

Vision threatening diseases such as glaucoma, macular degeneration, diabetic retinopathy and others often have no outward signs or symptoms, which is why eye exams, including a thorough retinal evaluation, are important to protect vision. In an effort to provide a more thorough eye exam, our practice has incorporated the iWellnessExam™ SD - OCT retinal scan and Optomap® ultra-wide digital retinal imaging.

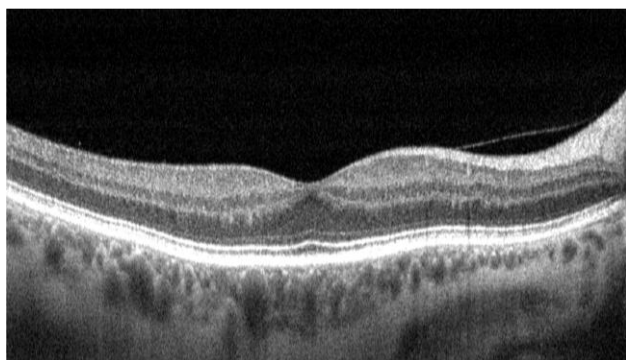
The iWellnessExam™ is a quick, non-invasive scan that allows our doctors to see beneath the surface of your retina. This unique technology can help our doctors detect vision threatening and systemic diseases in their very early stages, when they are most treatable. The Optomap utilizes scanning lasers to create a high definition image of 80-90% of the human retina. This allows the viewing of parts of the retina difficult to see under normal conditions.

As part of your pre-exam testing, our technician will perform the iWellnessExam which your doctor will review with you during your examination today. The \$49 charge is not covered by your vision or medical insurance, so this will be added to the balance of your visit today. Any questions you have about iWellnessExam and the results of the test can be discussed with the doctor during your examination.

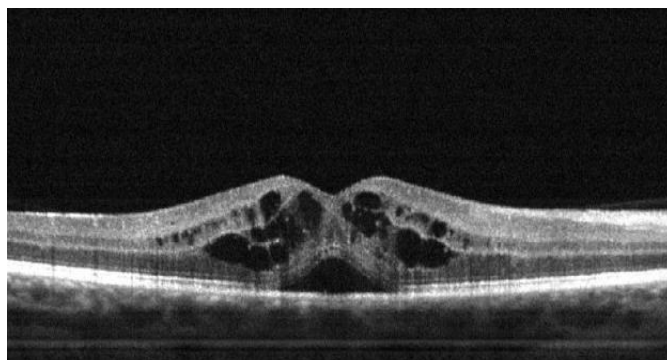
Thank you for choosing our practice to protect the health of your eyes!



Normal Wide field retinal image on the Optomap retinal exam



Normal retinal cross section iWellness OCT



Diseased retina visible to iWellness OCT exam often invisible to photos and ophthalmoscopy

As part of your examination today, our Doctors need for you to have an Optos Widefield Digital photograph of your retinas and iWellness OCT Retinal Scan. These photographs help our doctors view the health of your eye and also monitor for any potentially vision threatening conditions. The digital screening photos are only \$49 and are not covered by medical insurance or vision discount plans. This charge will be added to balance of your visit today.

Patient Signature _____ Date _____