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INFORMATION REGARDING DILATING EYE DROPS

Dilating drops are used to dilate or enlarge the pupils of the eye to allow the ophthalmologist/optometrist to better examine the small structures inside of your eyes.

Dilating drops frequently blur vision for a length of time which varies from person to person and may make bright lights bothersome. It is not possible for your doctor to predict how much your vision will be affected. Because driving may be difficult immediately after an examination it's best if you make arrangements not to drive yourself. If you do not have sunglasses with you, please ask our staff for a disposable pair.

Adverse reaction, such as acute angle-closure glaucoma, may be triggered from the dilating drops. This is an extremely rare and treatable with immediate medical attention. I hereby authorize Dr. Najafi-Tagol, and/or such assistants as may be designated by her, to administer dilating eye drops. The eye drops are necessary to diagnose my condition.

Patient Acknowledgement

Patient (or person authorized to sign)

Date

REFRACTION SERVICE AND/OR CONTACT LENS FITTING FEE

Refraction is the process of determining if there is a need for corrective eyeglasses or contact lenses. It is an essential part of an eye examination and necessary to write a prescription for glasses and/or contact lenses.

Most medical insurance plans, including Medicare, do NOT cover refractions or routine eye examinations (when no medical eye problem is known or suspected). Medicare allows that eye care providers charge separately for that portion of the examination, since refraction is not a non-covered benefit.

If you have a separate **vision plan** that covers routine or annual eye examinations, glasses and/or contact lens fittings, please let us know. Your vision plan may assist you with your eye care needs that are not covered by your medical plan.

Our office fee for refraction is \$60.00 and this fee is collected at the time of service in addition to any co-payment your plan may require. Should your plan pay us for the refraction, we will reimburse you accordingly. **Contact lens fitting services range from \$88.00 to \$530.00** depending on the complexity of the fitting, and are non-refundable. The supply of the contact lenses is separate from this fee.

If you have any questions regarding Medicare or other insurance policies and procedures, please do not hesitate to ask. We will do our best to assist you.

Patient Acknowledgement

I have read the above information and understand that the refraction is usually a non-covered service. I accept full financial responsibility for the cost of this service and understand it is due at the time of service. I understand that any co-payment, coinsurance, or deductible I may have are separate from and not included in the refraction fee.

Patient (or person authorized to sign)

Date

Interpreter

Date