

Additional Testing Patient Acknowledgement Form

In the event our doctors detect an ocular health condition that can better be diagnosed and/or managed by the use of additional clinical testing and/or imaging, these procedures are not considered part of your routine comprehensive eye exam and will therefore incur an additional expense. If you have medical insurance we will bill this expense to that plan; however, please note that these charges will be applied toward any unmet deductible, if applicable. All additional tests will be discussed and agreed upon prior to testing.

Any balance not covered by insurance is your responsibility.

I understand the above statement:

Signature Date

Email on File

I would like Riverbend Eyecare to use my email address on file for automated appointment reminders and to be able to receive and access exam summaries.

I accept: _____

Email: _____

I decline: _____

