

Patient Vision Lifestyle Questionnaire



To better help your physician diagnose and treat your visual difficulties, please check the following that apply:

Frantz EyeCare offers comprehensive vision services and a variety of cosmetic offerings. Would you or a family member be interest in learning more about these services? Thank you for your input. **Check all that apply.**

Vision Services

- All- Laser LASIK
- Eliminate Reading Glasses
- LASER Cataract Surgery & Multifocal Lenses
- Dry Eye Treatment
- Optical (Glasses & Contacts)
- Retina
- Glaucoma
- Macular Degeneration Treatment

Cosmetic Services

- BOTOX, Facial Fillers
- Liposuction
- Upper & Lower Eyelid Surgery
- Natural Breast Enhancements
- Fat Transfer to Face, Breast & Hands
- Laser Skin Resurfacing
- Minimal Incision Face & Neck Lifts

OPTICAL SERVICES

Our Optical Department offers the latest styles of eyeglasses and a variety of lens coatings to help you see your best.

1. Are you wanting to get new glasses today or a second pair? YES NO
2. How old are your current glasses? _____ years old.
(If older than three years, you should really have them changed. Due to wear and tear, older glasses may reduce the sharpness of your vision.)
3. Are you interest in contact lenses? YES NO
4. Do you have a vision plan? YES NO

Optical Value *Guarantee*

If you purchase a frame/lens combination from any Frantz EyeCare location and find the **exact** combination from another local retailer at a lower price, we will match the lower price and refund the difference.

To be eligible for a refund, you must present the actual quote from the other local retailer within 30 days of the original date of your purchase at Frantz EyeCare.

This offer excludes contact lenses and internet retailers.

Restrictions may apply.

Please visit our optical department for details

Print Name _____

_____/_____/_____
Date of Birth

_____/_____/_____
Date