

Welcome to Fry Eye Associates, P.A.

310 E Walnut Street, Ste. 101
Garden City, KS 67846
(620)-275-7248 or 1-800-526-3937

Luther L. Fry, M.D.
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ALL PATIENTS PLEASE READ THE FOLLOWING:

The enclosed **Medication Card** is provided for you to carry in your purse or wallet. Please list on it all medications that you are presently taking. Be sure to bring it with you on the day of your exam at the office.

Also, the day of your appointment, **please bring all your insurance cards** with you so we can verify all policy numbers and take a copy for your chart. We will file all primary and secondary insurance for you. After payment of insurance is received, any balance remaining will be payable within thirty days, unless prior arrangements have been made with our business office. If you have an **HMO**, you will need to verify with your insurance that they will cover any exams or procedures at Fry Eye Associates. Failure to do so, may result in the patient being responsible for payment. Please contact our office if you would like more information.

IF YOUR INSURANCE REQUIRES YOU TO HAVE A LETTER OF REFERRAL, PLEASE make this available to our office *PRIOR* to your appointment, or bring it with you on the day of your appointment. Failure to have this letter of referral may result in our office having to reschedule your appointment.

All patients need to submit the following information *prior* to your appointment:

- **Patient Registration Form (2-sided)**
- **Medical History Form**
- **Lifestyle & Visual Questionnaire**
- **Consent For Release of Patient's PHI Form**
- **NOTE: failure to return this information by mail, may delay your appointment start time. You may fax this form to 620-275-5262 if there is not sufficient time for mail delivery.**

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IMPORTANT INFORMATION FOR CONTACT LENS WEARERS:

If your appointment is for a *Cataract Evaluation* (or blurry vision), or for a *Refractive Surgery Evaluation*; soft lenses need to be removed a minimum of 1 week prior to your appointment, and rigid lenses need to be removed a minimum of 3 weeks prior to your appointment.

RESIDENTS OF CARE HOME FACILITIES:

All residents of care home facilities need to be accompanied by a care giver or family member. Our employees are not licensed or trained in lifting or rest room assistance.

CATARACT PATIENTS ONLY:

Enclosed is a *Cataract Letter* giving you all the information needed for cataract surgery. There are a few options available for you if you and your doctor feel cataract surgery is in your best interest. Please take time to read this letter before coming to your appointment.

THANK YOU IN ADVANCE FOR YOUR COOPERATION!

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