

phone: (901) 850-8572 • fax: (901) 850-8573

Cullison Eye Care is pleased to provide the Optomap retinal imaging and iWellness scan as part of your comprehensive eye exam. The Optomap and iWellness enhance your exam by producing both a detailed picture of the back of your eye and a non-invasive scan of the layers beneath your retina without sacrificing your time and comfort. For this reason, the doctors highly recommend this state-of-the-art technology to assess the health of your eyes.

The Optomap/iWellness provides:

- Confirmation of a healthy eye or the detection of disease presence without the use of drops and resultant side effects.
- A documented photo and scan of the retina, giving your doctor a more detailed, wider, and deeper view than can be achieved by any other means
- The opportunity for you to view and discuss the images of your eye with your doctor
- A permanent record for your medical file to enable the doctors to use the images and scans as a comparison with those to be taken at future examinations. This allows us to track even the smallest changes from the previous exam.

Even if you see clearly now, it doesn't mean your eyes are healthy or that they won't change. Vision threatening diseases such as glaucoma, macular degeneration, diabetic retinopathy, and even some types of cancer often have minimal or no outward signs or symptoms in the early stages. The Optomap and iWellness combo help our doctors detect these conditions in their very early stages, when they are the most treatable. That's why it's important that you choose to have your retinal health documented today either by this unique technology or by the dilation of your eyes. Dilation involves the use of drops to enlarge your pupil to obtain an adequate view of your retina. Side effects of eye dilation may include light sensitivity and blurry vision, especially at near distances. Occasionally, dilation will be performed in addition to the technology if eye pathology is suspected.

Should you have any further questions regarding your choice, please ask a member of our staff. Based on the information provided today, I would prefer:

Optomap photo & iWellness scan (additional \$45 fee)

Dilation (no additional fee)

□ Neither

Patient Name: _____

Patient (or Guardian) Signature: _____

Date: _____

