

PATIENT NAME: _____,

DATE: _____

Use PENCIL NOT PEN UNTIL ALL NUMBERS ARE FINALIZED when pt PAYS BALANCE!

A=TOTAL CHARGES (circle):

Staff:

DIAMOND: Vacuum-assisted LASEK + High-Definition in 1 or 2 eyes + Lifetime	\$7000/2 (\$5000/1)
PLATINUM: Vacuum-assisted LASEK + High-Definition in 1 or 2 eyes	\$6000/2 (\$4500/1)
GOLD: Alcohol-assisted LASEK + High-Definition in 1 or 2 eyes	\$5000/2 (\$4000/1)
SILVER: Alcohol-assisted LASEK in both eyes (no CustomVue™)	\$4000/2 (\$3500/1)
ReadingVizion™: Only if operating on both eyes (don't add if only 1 eye bc already more)	+\$1000
Add X-Press Recovery: add Faster Recovery to Silver Package (vacuum-assisted epi removal)	+\$1000/2 (\$500/1)
Add Lifetime Warranty: add Lifetime Warranty to Silver or Gold	+\$1000
Hi Rx: +\$2k/D > -9, +3, or 3D cyl, whichever is worse (use SE; don't forget to add for age!)	+\$
Operative Kit: (ComboDrop, Omega, Ketamine, Scrubs, Ointment, P & PF Tears)	+\$200 (Say Get Back!)
Comfort Package: (NO2, Valium, NSAID) MUST if NWCL or ≤ 25 (cannot be discounted by %)	+\$300 (Say Get Back!)
CXL only Collagen Cross-Linking for PMD/Ectasia and KC (cannot be discounted by %)	\$6000/2 (\$4000/1)
Add CXL to LASEK: Add CXL to any LASEK packages above	\$4000/2 (\$3000/1)
Amblyopia/Nystagmus/Ocular Albinism/Strabismus	+\$2000
Enhancing another surgeon's procedure (primary surgery not performed by us)	+\$1000 per eye!
No "Coach" of their own, so pay a Staff Member to be their "coach" in the OR (who can't work)	+\$100
Other Charges:	\$

A=TOTAL CHARGES = \$ _____

B=TOTAL CREDITS:

Referred by someone, full name bc we must send GiftCard for \$100:	(\$100)\$-
Medical Insurance:	Ded \$: \$- _____*
"I agree to have my insurance billed for Today's & Other Exams so I save \$, but if I have surgery & my insurance pays \$0, I must pay 50% of the Insurance Credit above (*) or I will be taken to collections"	
Signature:	
Affordability Package: Save \$1000: bring in 3 FCs (at 1 wk, 1 mo, 2 mo po: \$250 ea x 3 = \$750) + two 5* reviews on GoogleMaps + Yelp (\$75 x 2 = \$150) + 1 SM post + tag & follow both our acts (\$100). Any missing items will be charged to your cc at your 2 month po, but you will get the \$ back if you do these later. Sig:	
cc#: _____ Exp: ___/___ CVV: _____ zip: _____ \$-	
VSP/Davis/EyeMed/USlaser=15% (cannot be combined w Med Insur), QualSight=\$1525/eye (HD) \$-	
Cash ("folding \$" not chk, dep can be by cc, balance must be in cash) -5% of lower amt =	\$-
Other:	\$-

PUT INTO ACT: B=TOTAL CREDITS = \$- _____

C. PRICE AFTER CREDITS: (A - B =) **C=\$** _____

D. TESTING FEE "I agree this is non-refundable" *: = \$ **500**

___/___/___ CC chk Ven/Ppal CareC/Alph/Spay:Act# Staff: DrCSigCash:

<u>E. BAL</u>	TellPtMustPayBalB4SurgUnlessCash	(C-D=) E.BAL=\$
___/___/___	CC chk Fin Z/V/PP(\$) _____ Staff: _____	DrCSCash: ResidBal:\$ MUST
___/___/___	CC chk Fin Z/V/PP(\$) _____ Staff: _____	DrCSCash: ResidBal:\$ GET 2
___/___/___	CC chk Fin Z/V/PP(\$) _____ Staff: _____	DrCSCash: ResidBal:\$ ZERO

CLtrial\$100 / Orb\$500 / >1yrpo\$300 / SO\$500 / Avenova\$100 / Thermal\$400

Date: _____ **Type of Service** _____ **StaffName:** _____ **Method:** _____ **\$Amt (no cents):** _____
\$