

# CHICAGO ARBOR EYE INSTITUTE

Patient Name: \_\_\_\_\_

Appointment Date & Time: \_\_\_\_\_

Doctor: \_\_\_\_\_

Location: \_\_\_\_\_

Welcome to Chicago Arbor Eye Institute! We are excited to help you be on your way to a life less dependent on contacts or glasses.

Your appointment will take about an hour and a half and will include the following:

- **Please make sure your contact lenses are removed before the appointment. This insures that we will get the most accurate results and measurements from the tests we will take during the evaluation process.**
- **If you wear soft contacts, please take them out one week prior to your appointment.**
- **If you wear hard contacts, please take them out two weeks prior to your appointment.**
- **If for some reason you cannot be out of your lenses, please contact us to discuss your options.**
- **We will take measurements of your eyes to help us create a custom vision plan.**
- **Your eyes will be dilated using eye drops causing blurry vision, light sensitivity, and glare for 2-6 hours. Please bring sunglasses and/or make arrangements to have a driver with you.**
- **The doctor will check the health of your eyes and that information, along with test results, will be used to determine if you are a candidate for laser vision correction.**

Please arrive 15 minutes early to complete the registration process. We ask that you bring the following items with you:

- **Identification card**
- **Current glasses or contact lenses**
- **A list of all medications you are taking**
- **All eye drops that you use (please bring the actual bottle)**
- **The name, address, and phone number of your primary care physician**
- **The name, address, and phone number of your referring doctor and information he or she has provided you, if applicable**

If you are a new patient to Chicago Arbor Eye Institute, please complete these additional forms prior to your visit and bring with you to your appointment:

- **Patient Registration Form**
- **Ocular and Medical History**
- **Responsibility for Payment**
- **HIPAA / Privacy Practices Form**
- **Refraction Policy**

Enclosed you will also find information about LASIK and the LASIK team here at Chicago Arbor Eye Institute. For additional information about LASIK, please visit our website: [www.chicagoarboreye.com](http://www.chicagoarboreye.com). Go to our Resources page, then under LASIK, Laser Vision Correction to locate the information. We look forward to working together to improve the way you see the important and beautiful things in your world. If you should have any questions prior to your appointment, please do not hesitate to contact our office at (708) 326-7054.

Thank you for putting your trust in us,  
The Laser Vision Correction Team of Chicago Arbor Eye Institute

## LOCATIONS

### HOMEWOOD

2640 W 183rd St.  
Homewood, IL 60430  
P: (708) 798-6633

### ORLAND PARK

9731 W 165th St.  
Suite 31  
Orland Park, IL 60467  
P: (708) 364-0020

### EVERGREEN PARK

2850 W 95th St.  
Suite 401  
Evergreen Park, IL 60805  
P: (708) 499-5500

### MERRIONETTE PARK

11600 S Kedzie Ave.  
Suites C and H  
Merrionette Park, IL 60803  
P: (708) 388-4400

### HYDE PARK

1525 E 53rd St.  
Suite 1002  
Chicago, IL 60615  
P: (312) 236-6575

### ELSTON

5086 N Elston Ave.  
Chicago, IL 60630  
P: (773) 282-2000

### WELLINGTON

836 W Wellington Ave.  
Chicago, IL 60657  
P: (773) 296-8000

### ST. ELIZABETH'S

1431 N Western Ave.  
Chicago, IL 60622  
P: (773) 342-8000