



Make the most of your visit

For an effective examination, your eye care professional needs to know as much as possible about your sight. So you want to be prepared. This form will remind you about what you want to say—and organize data the examiner needs to make an informed decision. So fill it out, print it out, and take it with you.

1. Describe any vision problems you are experiencing.

- Loss of vision
- Rubbing eyes excessively
- Blinking more than usual
- Squinting
- Crossed or misaligned eyes
- Bulging of one or both eyes
- Recurring eye infections
- Red-rimmed, encrusted, or swollen eyelids
- Inflamed or watery eyes
- Other

2. Family history of:

- Diabetes
- Glaucoma
- Eye Surgery
- Cataracts
- Turned eye/"Lazy Eye"
- Other

3. Describe any eye injuries or surgery.

Date: _____
Hospital: _____
Doctor: _____
Procedure: _____

4. Describe any other health problems.

Allergies: _____
Chronic health problems: _____
Operations: _____
Other: _____