

Eva Liang, MD, FACS
Jeffrey Hart, MD
Stewart Park, MD, FACS

Michael Pernula, MD
W. Reed Jaussi, MD
Sahba Fakhra, OD

Selim T. Koseoglu, MD
Jeylan El-Mansoury, MD

Adam Schwartz, OD
Tina Licina, OD

George Bouras, OD
Dennis Giang, OD

REQUESTED BY

Dr. _____ OD MD DO PA
Location _____ Phone Number _____

PATIENT DATA

Patient Name _____ Birth Date / /
Phone: Cell _____ Home _____ Work _____
Insurance _____
Has been seen by an optometrist in the last 6 months

CONSULT INFORMATION

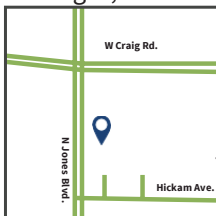
Cataract Surgery	YAG Laser Evaluation	Retinal / Diabetes Evaluation
LASIK/Refractive Surgery	Clinical Research	Dry Eyes / Tearing / Blepharitis
Corneal Surgery	Glaucoma Screening	Vitreolysis
Eyelid Surgery	Keratitis / Ulcer	Strabismus/Amblyopia
Pterygium Surgery	Optic Nerve / Neuro Evaluation	Other _____

SYMPTOMS

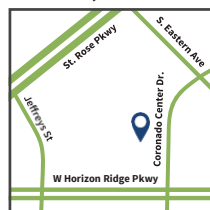
OD OS OU
Decreased Vision Red Eye / Discharge VF Defect
Pain / Foreign Body Sensation Increased IOP Floaters / Flashes
Visual Acuity 20/40 or worse Other _____

LOCATION

5871 W. Craig Rd
Las Vegas, NV 89130



871 Coronado Center Dr., #130
Henderson, NV 89052



330 S. Rampart Blvd., #360
Las Vegas, NV 89145



PLEASE BRING

Current ID and Insurance Cards	Glasses / Contacts
List of medications and medical records	A driver, you may be dilated
Your visit may be as long as 2 hours, depending on the evaluation necessary	
Please arrive 15 minutes early for new appointments in order to complete paperwork	