**Digital High Definition Retinal Evaluations** are revolutionizing the early detection and treatment of eye conditions such as macula disease, retinal disease and diabetes which may lead to sight threatening impairment. It consists of two very sophisticated and non-invasive imaging techniques that allow us to obtain a series of three dimensional, high definition cross sections of the retinal layers, as well as full color images of the optic nerve, macula and major arteries and veins that supply blood to the retina. Our Digital High Definition Retinal Evaluation also has the capability of measuring the retinal nerve fiber layer thickness for glaucoma and also detects other diseases of the optic nerve.

Digital High Definition Retinal Evaluation is:

- A **non-invasive** technique that allows for early diagnosis of disease that can advance without symptoms of warning.
- **Essential** for patients with a history or family history of diabetes, high blood pressure, high cholesterol, headaches or a strong eyeglass prescription.
- **The standard** for early detection of glaucoma and macular degeneration.
- **Strongly recommended** by our doctors for all patients annually.
- **Dramatically improved precision** for a thorough evaluation of your internal eye health that includes an in depth view of the retina not seen with regular dilation.

Advanced diagnostic screenings of the retina are not covered by vision insurance plans. You can elect to have this affordable procedure to protect your eye health today.

☐ I **understand** the vital importance of this test and accept responsibility for the additional payment of:

- $39  Full color image of the retina and optic nerve, or
- $49 Three dimensional, digital layers of the retina, or
- $59 Both procedures if elected on the same day

☐ I **decline** the Digital High Definition Retinal Evaluation against medical advice and release Coan Eye Care and Optical Boutique from any liability resulting from failure to diagnose or treat any eye condition due to the lack of diagnostic information which can be obtained by performing this test.

Patient name: ____________________________________________

Signature: ______________________________________________

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**Coan Eye Care**

& OPTICAL BOUTIQUE

**Normal Retina**

**Macular Degeneration**

**Diabetic Retinopathy**