

Pre-Consultation Questions for Vision Correction

Dear [Patient's Name],

We look forward to your upcoming consultation for vision correction. To help us provide you with the best care, please take a moment to answer the following questions:

1. What specific vision problems are you experiencing?
2. Have you previously had any eye surgeries? If yes, please specify.
3. Are you currently taking any medications? If so, please list them.
4. Do you have any allergies? Please specify.
5. What is your current eyewear prescription?
6. Have you had any eye injuries or conditions (e.g., cataracts, glaucoma)?
7. What are your goals for vision correction (e.g., improve distance vision, reduce dependency on glasses)?

Thank you for taking the time to complete this questionnaire. Your responses will help us identify the best vision correction options for you.

Sincerely,

[Your Name]

[Your Title]

[Clinic Name]

[Contact Information]