Canby Eyecare
Ashley K McFerron OD
364 N Ivy St
Canby OR 97013
503-266-4847 ph
541-393-2539 fx

PATIENT INFORMATION

Name _____ **M / F** **Birthdate** _____ **SSN** _____

Marital status (check one): **Single** _____ **Married** _____ **Divorced** _____ **Separated** _____ **Widow**_____

Address _____ **City/State/Zip** _____

Home Phone _____ **Cell Phone** _____ **OK to Text? Y / N**

E-mail _____ **Preferred Method of Communication** ❑ **Phone** ❑ **Text** ❑ **Email**

Employer Name _____ **Work Phone**_____

Preferred Language _____ **Race** _____ **Ethnicity** _____

Spouse Name _____ *Birthdate* _____ *SSN* _____

Spouse Employer _____ *Spouse Phone* _____

If someone other than the PATIENT is responsible for payment, complete the following:

Name of the responsible party _____ Address _____

Relationship to patient _____ SSN _____ Home Phone _____

Employer _____ Birthdate _____ Work Phone _____

How do you intend to pay? Cash _____ Check _____ Credit Card _____ Insurance _____ Care Credit _____ Other _____

In case of EMERGENCY please contact:

Name _____ Relationship_____ Phone _____

Ok to release information to _____

How did you hear about our office? _____

I understand that responsibility for payment of optical services provided at Canby Eyecare for myself or my dependents is mine, due and payable at the time services are rendered. I acknowledge that I am financially responsible for all charges. I agree to pay a 1.5% per month finance charge on all accounts 60 days, with a minimum fee of $1.50. Insufficient returned checks charge $25.00. I will give 24 hours notice if I am unable to keep an appointment.

Dilation of your eyes is necessary for Dr. McFerron to better see your retina. However, dilation can cause blurred vision and/or glare for many patients for several hours. Canby Eyecare has temporary sun protection for your use following dilation. These are available at no charge in the exam rooms as well as at the front desk. If one of our employees has not given you a pair, please ask for some. While these glasses help, Canby Eyecare recommends that you do not drive for the first few hours following dilation due to the blurred vision and glare. You may not be safe operating heavy equipment or hand tools. We will be happy to let you use our phone to call someone to pick you up or you may stay until the dilation effects have worn down. You may leave your car in our lot as long as necessary or even over night. Please do not do anything that would endanger yourself or others. You may return for this dilation on another day if it would be better for you.

Patient or Responsible Party Signature _____ Date _____

I authorize representatives of Canby Eyecare to leave voice mail messages for any necessary communications. _____ Date _____

❑ I have received a copy of the Canby Eyecare Privacy Practice. Signature_____ Date _____

Update (Initial and Date)_____ Update (Initial and Date) _____ Update (Initial and Date)_____