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**IMPORTANT INFORMATION FOR PATIENTS**  
**DESIRING A CONTACT LENS PRESCRIPTION**

The prescription which may be given to you following your examination is for **glasses only**. This prescription will aid in the evaluation required for fitting contact lenses, **which must be done separately**.

An evaluation should include certain measurements, a diagnostic fitting, and a follow up appointment. This evaluation is necessary (even if you are currently wearing contact lenses) to maintain the health of your eyes.

This evaluation can be done in **our optical dispensary** or by another qualified optician of your choice.

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Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Technician