

Laser Vision Correction Questionnaire

1. Did you, or do you have? (If yes, please circle and explain)

Allergy or Hay Fever
 Amblyopia (Lazy Eye)
 Asthma
 Autoimmune Disease
 Cataracts
 Crossed Eye/Wall Eye
 Double Vision
 Eye Surgery
 Do you smoke?

Diabetes
 Frequent or Recurrent Headaches
 Glaucoma
 Heart Disease
 High Blood Pressure
 Sinus Problems
 Thyroid Disease
 Other

2. Are you taking any medication or do you have any medication allergies? please list:

3. Why are you interested in Laser Vision Correction?

4. How long have you been considering Laser Vision Correction?

5. Why haven't you had Laser Vision Correction?

6. What kind of work do you do and what are your hobbies?

7. How many hours per day do you use a computer?

8. Are you interested in seeing well **at distance** without glasses after surgery?

_____ Prefer no distance glasses _____ Not important to me. I wouldn't mind wearing distance glasses

9. Are you interested in seeing well **at near** without glasses after surgery?

_____ Prefer no distance glasses _____ Not important to me. I wouldn't mind wearing distance glasses

10. Zones of Vision

We divide vision into 5 "Zones of Vision"

Near ←	-----				→Far
Zone 1	Zone 2	Zone 3	Zone 4	Zone 5	
(12-20 in)	(2-4 ft)	(6-20 ft)	(20-100 ft)	(100 ft+)	
Newsprint	Headlines	Indoors	Day-far	Night-far	
Phone book	Computer	TV	Driving	Night driving	
Maps	Menus	Cooking	Golf	Movies	
Sewing	Price tags	Cleaning	Road signs	Star gazing	

Which group of "Zones of Vision" is the most important group to you? Please choose **only one** of the following three options of Group A, B or C:

Group A: Zones 1, 2 and 3
 Group B: Zones 2, 3 and 4
 Group C: Zones 3, 4 and 5

11. If you **had** to wear glasses after surgery for one activity, for which activity would you be **most** willing to use glasses?

Reading fine print
 Computer
 Driving

12. Please place an "X" on the following scale to describe your personality as best you can:

[-----][-----]
 Easygoing Perfectionist

Please Sign Here _____

Date _____