

Beckman Dry Eye Institute

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Patient:

Date of Birth:

Appt Date & Time:

Referred By:

Address:

Phone:

Referred for (check all that apply):

- Dry Eye Evaluation with Images and Full Report
- Eyelid Exfoliation with Nulids / Irrigation with Rinsada
- Meibography, Lipiflow, Other Thermal Evacuation
- Intense Pulse Light, Radiofrequency, Optilift (RF/DMsT)
- Advanced Light Energy Therapies
- Amniotic Membrane (Prokera) / Oxervate
- Autologous Blood Serum / Drug Therapy
- Percutaneous Allergy Skin Testing
- Lifestyle Counseling / Systemic Drug Therapy

Please Return Patient after:

- Dry Eye Evaluation and Report
- Dry Eye Evaluation, Report, and Treatment Initiation
- Treatment indicated above, without evaluation
- Upon symptom resolution and patient considered stable

History of known Dry Eye treatments / Additional notes:
