

American Academy of Optometry
Assistant Professor of Ophthalmology John Hopkins 1980-2001
Past Director, Contact Lens Service Wilmer Eye Institute
National Eye Institute Consultant
Refractive Surgery Consultant

Gregory P. Kracher, O.D., LLC
QUALITY FAMILY EYECARE

Welcome back!

To serve you best, please provide the following information:

Name _____ *Date* _____

*Are there any changes in your contact information; address,
Phone#...?* _____

Email address: _____

Reason for today's visit? _____

*Have you experienced any significant changes in your health or vision
since your last visit? If yes, please describe changes.*

Are you planning to choose new glasses or order contacts? _____

*Please list current medications & length of time you have been taking the
medication.* _____

Have you been diagnosed with diabetes? _____

Smoker or non smoker? _____ *Do you use sunglasses?* _____

Are you allergic to any medications? If yes please list. _____

Thank you ☺