CAVANAUGH EYE CENTER PA

Cavanaugh Eye Center
6200 W. 135th St. Suite 300
Overland Park, KS 66223
Phone: (913) 897- 9200
FAX: (913) 897 - 9233

Consultation Request Form:

☐ Timothy B. Cavanaugh, M.D. ☐ Eric S. Beatty, O.D.

Referral Doctor:_____

Preferred Contact #_____

Patient Name:_____

Date Consultation Scheduled**:**_____

Pertinent Patient Information:

cc VA: OD 20 / _____ **OS** 20 /_____

(App NCT Tonopen)
Tonometry: OD _____ **OS** _____

Manifest Refraction: Dominant Eye

OD:_____ **OD**

OS:_____ **OS**

Target Refraction: ☐ Phakic OU
☐ -1.00 Non-Dom Eye
☐ Other _____

Address:_____

City, St. Zip:_____

Phone:_____

Needs to be seen within:_____ Days, Weeks, Months

Preferred Location: ☐ Overland Park ☐ Topeka

NOTES:_____

_____

_____

Purpose of Consultation: (Please check all that apply) **OD OS OU**

☐ Cataract Evaluation ☐ Evaluation for YAG Capsulotomy ☐ Phakic IOL
☐ Multi-focal IOL ☐ Single Vision ☐ Toric IOL

☐ LASIK / PRK ☐ Refractive Lens Exchange ☐ NearVision CK

☐ Corneal Evaluation ☐ PK / DSAEK ☐ Keratoconus

☐ External Disease ☐ Pterygium & Pinguecula Removal ☐ OrbScan Topography

☐ LASIK Enhancement ☐ Specular Microscopy / Pach ☐ Zywave Aberrometry

Will you Co-Manage this patient? ☐ YES ☐ NO at: ☐ 1 Day ☐ 1 Week ☐ 1 Month

Signature_____