

iLASIK Lifestyle Questionnaire



Name: _____ Referred by: _____ Date: _____

We recognize that your eyes are very important to you. We would like to know how you use your eyes on a daily basis. Along with your eye exam, this info will assist us in recommending the best options for your eyes and your personal Lifestyle Vision.

Occupation: _____ Hobbies: _____

Do you...

- Yes No Have an eyeglasses or contact lenses prescription that has significantly changed in the last 12 months?
- Yes No Suffer presently or previously from any eye diseases such as dry eyes, herpes infection of the eye, or eye injuries?
- Yes No Take any of the following: immunosuppressants (e.g. steroids, Methotrexate, Plaquenil), retinoids (e.g. Accutane for acne), antiarrhythmics (e.g. Amiodarone for irregular heart rhythms), or triptans (e.g. Imitrex for migraines medications)?
- Yes No Have a connective tissue disorder, autoimmune disorder, or rheumatologic disorder such as lupus or rheumatoid arthritis?
- Yes No Think you are pregnant/nursing or expect to be pregnant/nursing in the next 2 months?
- Yes No Agree to be out of soft contact lenses 1 week and hard contact lenses 3 weeks before your preoperative appointment?
- Yes No Understand the laser vision correction is not risk-free and that glasses may still be needed in some circumstances?

Do you presently wear glasses? Never Yes, all of the time Yes, only for far distance (like driving)
Yes, only for reading Yes, only for computer use

How important is it for you to read or use the computer without glasses?
Not important Somewhat important Very important

How many hours a day do you: Read? _____ Use the computer? _____

Where do you hold a book when readings? Close to your face Chest level In your lap

How long have you worn glasses or contacts? _____

How do you feel about glasses? _____

If it were possible to go without glasses most of the time, would you like that? Yes No

Do you drive at night? No Occasionally Nightly As a profession

Place an X to best describe your personality:

Easygoing |-----|-----|-----|-----|-----|-----|-----|-----|-----| Perfectionist