Willowbrook Optometry
Intake Form – Minor Patients

Patient Name: _____ Date of Birth: _____ Age: _____
Parent/Guardians Name: (First) _____ (Last) _____
Address: _____ City: _____ Prov: _____ Postal code: _____
CareCard: _____ Family Doctor: _____

Cell Phone Number: _____ Secondary Phone Number: _____
Text Reminders: Yes ☐ No ☐ Email: _____

Patient's Last Eye Exam: _____

Concerns with eyes/vision: _____
Medications: _____
Allergies: _____
Medical conditions: _____
Any Eye injuries, surgery,
Or disease (Child or family): _____

Does your child wear glasses? Yes ☐ No ☐ If so, how old are they? _____

Does your child wear contact lenses? Yes ☐ No ☐
If **Yes**, *what Type of Lenses?* _____
If **No**, *are you interested in getting more information about contact lenses for your child?* Yes ☐ No ☐

Extended Health
We work with the following providers:
Great West Life, Sunlife, Pacific Blue Cross, Medavie Blue Cross, VAC, Greenshield/SSQ, Standard Life, Johnson Inc, Industrial Alliance, Maximum Benefit, Chambers of commerce Group Insurance and Manulife.

Extended Health Insurance Provider: _____
Members Name: (First) _____ (Last) _____ (Date of Birth) _____
Policy/Provider Number**:** _____ Member ID**:** _____
Relationship to Member: Child ☐ Full Time Student ☐

There is more to your Child's Eye Exam than checking for 20/20 Vision…

Your Doctor recommends the Optomap Digital Scan for your child's Eye Exam. This Scan allows the Doctor to get a more detailed view of behind the eye. It's important to monitor eye health, all images stay on file and this allows the Doctor to monitor any eye health changes as they grow.

The MSP Care Card covers for the Basic Eye Exam. The fee for the Optomap Digital Scan is $15 and can be billed to most extended health plans.

Would you like your child to have the Optomap Scan? Yes ☐ No ☐
Or, I would like more information please ☐

'Excellence in Eye Care, to Every Patient, Every Time.'