

SCHEDULE A TELEHEALTH APPOINTMENT

During your virtual dry eye consultation, you can use this form to help guide your conversation about dry eye disease, your current treatment, and if it's time for a prescription. You can also bring this form to any follow-up appointments with an eye doctor.

BEFORE YOUR TELEHEALTH APPT: FIII

out the questionnaire below to help describe your dry eye

	e sure your camera is on, you're not muteo tting in good light.
01: How are you	r eyes feeling? Select all that apply.
Achy	Itchy
Gritty	Burning
Other:	
Describe your	symptoms
02: At what time uncomfortable?	es are your eyes the most
Watching TV, re	eading, on the computer, outdoors, etc.
prescriptions, o	er-the-counter eye drops, r other treatments you are using ncy.
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DURING YOUR TELEHEALTH APPT: Ask

the questions below. Write down the answers as you learn

about dry eye disease and if a prescription treatment

05: What may be causing my dry eye symptoms?

What would make this Teleheath visit a success?

consultation and any other questions you may have:

Answer

06: Is a prescription treatment right for me?

AFTER YOUR TELEHEALTH APPT: You can fill out the information below to help you schedule a follow-up visit with an eye doctor in person.

Eye	doctor	referral:		

Things to ask in a follow-up appointment

My pharmacy:

can help.

Other follow-up information:

Contact information

Contact information

Click the "share" icon in your browser below to save this form. Discuss with your local eye doctor if a follow-up appointment is necessary.

