**KING’S WAY EYE CLINIC & OPTICAL**

PATIENT INFORMATION AND OFFICE POLICIES

**CONTACT INFORMATION & OFFICE HOURS**

Phone: 813-681-2020 – Fax: 813-689-0802 – Email: kingswayeye@yahoo.com

**Monday** 10:00 am - 8:00 pm, closing for lunch 2:15-3:15

**Tuesday** 9:00 am - 6:00 pm, closing for lunch 1:15-2:15

**Wednesday** 8:00 am – 6:00 pm, closing for lunch 12:15-2:15

 **Thursday** 8:00 am - 6:00 pm, closing for lunch 12:15-1:15

**Friday** 8:00 am - 1:00 pm

**PRESCRIPTION REFILL POLICY**

Refill requests are handled in the timeliest manner. Please allow between 2 and 5 business days to process your request.

**TELEPHONE MESSAGE POLICY**

Our goal is to return all messages as quickly as possible. Please allow 48 hours (2 business days) for all non-emergencies.

**APPOINTMENT POLICY**

If you need to reschedule or cannot make your appointment for any reason, we ask that you notify our office a minimum of 24 hours in advance. If you arrive late for an appointment, our staff will have to check with Dr. Walter to see if there is sufficient time to complete your examination. You may be asked to reschedule.

**PAYMENT OPTIONS AND FINANCIAL POLICY**

* You can choose from: Cash, Check, Visa, MasterCard, Discover, American Express or Care Credit.
* For patients with vision insurance we are happy to work with your carrier to maximize your benefit and directly bill them for reimbursement vision care. For copayments, overages, and patients paying out of pocket, we require payment **prior** to the submission of any optical material order (i.e.: contacts, frames, lenses, sunglasses).
* Returned checks accrue a $39 fee in addition to the amount that is still owed.

**WHAT SHOULD I BRING TO MY EXAM?**

To help us better serve your optical needs we find that having the following items at your appointment to be especially helpful.

* Please review our HIPAA Notice of Privacy Practices.
* All current eyeglasses and contact lenses you use, including your most used over the counter reading glasses and all previously written glasses or contact lens prescriptions**. Do not** sleep in your contacts the night before your exam.
* A list of any and all medications, including dosages, and any nutritional supplements you are taking.
* A list of questions or concerns, if you have any, to ask Dr. Walter.
* Both your medical and vision insurance cards. We will be scanning these to keep in your file. Typically, we will pre-authorize your visit through your vision insurance company prior to your exam date.

**WHAT TO EXPECT**

Your initial complete exam will include a refraction to determine any prescription for glasses. We will also dilate your eyes so that the doctor can check their overall health. The doctor may request additional tests, if necessary. Please allow at least 2 hours for your exam. (Part of this time is spent waiting for your eyes to dilate and the anticipated time spent in our optical showroom). Additional testing may require more time. Contact lens fittings can also take extra time.