# Myopia Treatment Plan for: First Name Last Name Treatment: Atropine

Date: Today's Date/Date quoted

Prepared by: Vision Source Eye Center of the Triad

# Reason for visit to Vision source eye Center of the triad, A Treehouse Eyes Provider:

Myopic progression

# Relevant examination findings and family history:

- 1. Progressive Myopia
- 2. Family eye history
- 3. Use of digital devices
- 4. Amount of time spent outdoors
- 5. Ethnicity
- 6. Age

# **Recommendations:**

Based on the examination findings, family history and experience with similar cases, *First Name* is a candidate for myopia treatment. The first goal of treatment will be to reduce future progression of myopia as much as possible thereby possibly reducing *First Name*'s risk of other serious eye diseases later in life (for example glaucoma, retinal detachments and others) often associated with myopia. The second goal will be to reduce the need for stronger vision correction year after year.

### **Recommended treatment: Atropine 0.05% Nightly Eye Drops:**

This treatment uses the prescription eye drop atropine, formulated to a specific concentration to reduce the progression of myopia.

These drops are typically administered by the parent/guardian, one drop in each eye at night. We will instruct you in the proper way to do this.

We anticipate a period of active care of about one month while we monitor *First Name* and how well vision is adapting to treatment. Missing appointments interferes with progress and will prolong treatment time.



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# Next steps for Atropine eye drop treatment for myopia management:

After an initial payment is received, we will call in the prescription for the atropine eye drops to a compounding pharmacy, who will make the drops to our exact specifications. The concentration used is not available "off the shelf" in most pharmacies, therefore excluding the ability to use major market pharmacies. Payment for the drops is made directly to the pharmacy, who will call you for payment information. It takes approximately one week to have the drops delivered to you.

We will see *First Name* for follow up visits over approximately a four to six week period after treatment begins. It is not unusual that during the first week that *First Name* may be slightly light sensitive. This is usually temporary. Should it be significant, stop using the drops and call our office.

Some children also report mildly blurry reading vision when they first start using their drops. This is also usually temporary.

Once it is determined that *First Name* is doing well with the eye drop therapy, we will schedule a follow-up visit for approximately 3-4 months, depending on your child's rate of progression.

Most patients are done with their initial follow up care in one month although some may take more or less time.

Families should allow 2-4 visits over about a one-month period. While the degree of success in slowing down the rate of myopia is usually good, it cannot be guaranteed. As with most medical treatments, rates of success, (amount of decrease of progression of myopia in this case) vary from one patient to the next.

#### **Fees for treatment:**

The fees charged are a total comprehensive fee, including the cost of atropine eye drops. Payment for the drops is made directly to the pharmacy. Our fee is not dependent on the exact number of visits. Appointments will be made as often as necessary to accomplish our mutual goal of slowing down the progression of myopia.

If circumstances beyond your or our control prevent you from continuing or completing treatment, there are certain fees that cannot be refunded. Each case will be determined individually based on the amount of office time used up to that point. If the fee due exceeds the total of payments made, it is understood that you are responsible to pay the difference even though treatment has been discontinued. If the payments made exceed the fee for services, you will receive the appropriate refund.



# Fees for the first two-years of treatment:

Payment Plan A - Monthly installments over 24 months \$144.00 per month for 24 months

Payment Plan B - Full 24 month treatment program \$3456 one time payment

\*If paid in full, a 5% discount will be applied for total cost \$3266

# This fee includes:

- Initial Consultation, corneal bio-microscopy, corneal topography mapping, retinal imaging and repeated axial length measurements
- As many visits as may be needed to ensure proper eye health and optimal myopia management
- Addition of secondary therapies or switch to alternative therapy if necessary without additional expense

#### Fees for successive years of treatment:

Currently \$485 per year, subject to change

- Corneal bio-microscopy, corneal topography mapping, retinal imaging, and axial length measurements
- As many visits as may be needed to ensure proper eye health and ongoing optimal myopia management

## This fee does not include:

- The atropine eye drops. They will be sent and billed to you directly from the pharmacy.
- Medical visits, including eye emergencies
- Annual Comprehensive Eye Examination

Our goal is the best outcome for your child, and our fees are structured with no surprises so there are no extra costs if more visits are needed.

We accept major credit cards, checks, and cash and also offer a convenient financing plan. Our myopia coordinator can provide more details on this financing option.

