



Kamra Day of Surgery Checklist

Bring your folder with ALL paperwork to your appointment.
Please bring ALL drops with you to your appointment.

FILL PRESCRIPTIONS ONE WEEK EARLY

*Drops are required, even if they are not covered by your insurance

1. **Xiidra RX**- Can be started up to 2 weeks prior to surgery.
2. **Vigamox RX** *Antibiotic*
(Place one drop in eye(s) to be treated the **night before** AND the **morning of** your surgery.)
3. **Pred Forte RX** – Anti-inflammatory (*prednisolone*) Used after surgery
4. **Preservative Free Eye drops** – OTC (Get 2 boxes of 25-30 count individual vials to be used after surgery.)

Visit goodrx.com to find discounts on these medications.

Your arrival is scheduled for _____ at _____.

You will be in the office for 1 ½ hrs. (Arrival times are tentative and may change)
(A minimum 72 hour notice is required for all appointment changes)

Remove contact lenses _____ prior to recheck/treatment
_____ **LAST DAY WITH CONTACTS!**

REMEMBER:

- You **NEED** a driver to **bring** you, **stay with you**, and take you home. (Arrange for a driver for your one day follow-up, if needed.)

*Please eat **prior** to your surgery*

NO EYE MAKE-UP, COLOGNE, PERFUME, SCENTED LOTIONS OR CAFFEINE THE DAY OF THE PROCEDURE

Your one day follow-up is scheduled for _____ at _____.
Second follow-up _____ at _____

Please be sure to **read ALL consent forms PRIOR** to your surgery day! This way you will have time to call us if you have any questions. We will sign the forms together on the day of your treatment.

The total cost of your surgery will be:

\$ _____ less deposit of \$ _____ = \$ _____ due day of surgery
(Prices are guaranteed for 30 days from pre-operative examination)

***Full payment is required on the day of surgery**

Methods of payment:

- Visa, MasterCard, American Express, Discover, Flex, HSA
- Interest free or low monthly payment financing
THERE IS A **LIMIT OF 2** OF THE ABOVE OPTIONS
- Cashiers Check Made payable to Keil Lasik Vision Center
No Personal Checks Accepted, Must be EXACT amount for cash payment

PLEASE NOTE!

Most credit cards have a daily or transaction limit.

If using a credit card (ie, Visa, MasterCard, American Express, Discover, Flex or, HSA).....

Prior to surgery day,

You will need to call the bank associated with the card, to **pre authorize** the large transaction.

If you are planning on financing, you have two options:

CARE CREDIT- please apply through their website carecredit.com
12 MONTHS 0% INTEREST AVAILABLE

WELLS FARGO- Please apply at wellsfargohealthadvantage.com/apply
24 MONTHS 0% INTEREST AVAILABLE

Financing **MUST** be arranged **PRIOR** to surgery day. Bring your account number with you to your surgery.

There is a limit of TWO credit transactions per surgery
(ie Flex card, HSA card, any credit card or Financing)