



Dear Patient:

Welcome to Columbia Eye Clinic. We are honored that you have chosen us as your health care provider and look forward to meeting you. Our goal is to provide the highest quality professional eye care for all of our patients in a timely and proficient manner.

In order for you to be seen as efficiently as possible, **we'd like to request that you arrive 15 minutes prior to your scheduled appointment time.** This will allow the appropriate time needed to ensure that all required paperwork and insurance information is obtained.

Please review, complete, and bring with you to your appointment the following items:

1. Patient Information Form
2. Consent / Authorization / Financial Policy Form
3. Patient History Form
4. Picture ID
5. Insurance Card(s)
6. Authorization Paperwork (*if your insurance requires an authorization for coverage of the visit, please obtain this from your primary care physician*)

Payment is due at the time of service. This would include any co-pays, past due/bad debt balances, a self-pay status, services not covered by your insurance, etc.

Please remember that we have reserved this appointment time especially for you. If you are unable to keep your scheduled appointment time, please call our office at least 24-hours in advance at **803-779-3070** to cancel. We will be happy to reschedule you for another date and time that is more accommodating.

Northeast

100 Summit Centre Dr.
Columbia, SC 29229

Pickens

1920 Pickens St.
Columbia, SC 29201

Lexington

100 Palmetto Park Blvd.
Lexington, SC 29072

West Columbia

3227-C Sunset Blvd.
West Columbia, SC 29169