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Website: CorneaAz.com

Dear Doctor:

RE: _____

We are writing to you regarding our mutual patient who is soon to have eye surgery under a local anesthetic. We would like him/her to have a general physical with CBC and lytes as well as any special testing that you feel he/she may require to be cleared for this surgery.

Please FAX us a WRITTEN CLEARANCE FOR SURGERY from your last examination. The clearance should include a list of the patient's current medications and any special instructions.

If you would prefer to use the attached form for your history and physical, please do so. It is provided for your convenience.

Sincerely,

Robert H. Gross, MD

Jung T. Dao MD

Brandon K. Suedekum MD

CORNEA CONSULTANTS OF ARIZONA

HISTORY AND PHYSICAL

Patient Name _____ Date _____

HEENT _____

Lungs _____

Abdomen _____

Extremities _____

Impression _____

Current Medications Blood Thinners	Strength	Frequency	Reason

IS THE PATIENT CLEARED FOR SURGERY?

YES **NO**

Doctor's Name _____ Phone _____

Address _____

Signature _____