

DR. MICHAEL GOODMAN AND ASSOCIATES

DOCTORS OF OPTOMETRY

105 Evesboro Road • Columbus, OH 43232

(614) 239-8100

DATE _____ EXAM DATE _____

PATIENT NAME _____

R _x EYEGLASS	SPHERE	CYL	AXIS	ADD	PRISM
R					
L					

EXP. DATE: _____

REMARKS: _____

R _x CONTACT	SPHERE	CYL	AXIS	ADD	BASE CURVE	DIA
R						
L						

LENS TYPE/BRAND: _____ COLOR: _____

REMARKS: _____

EXP. DATE: _____, O.D.