

NORTHWEST HILLS



3921 Steck Ave. A-121 Austin, TX 78759

P: (512)328-0555 F: (512)340-0009

www.nwhillseyecare.com

Patient Referral Form

Patient: _____ DOB: _____ Phone: _____

Referring Doctor: _____ Date: _____

Diagnosis/ ICD 10: _____

Best Corrected Visual Acuity:

Right Eye: _____ Left Eye: _____

Reason for Referral:

- Low Vision services
- Occupational Therapy
- Pediatric/Failed Vision Screening
- Visual Field (Humphrey, Tangent, Arc perimetry)
- OCT
- VEP
- ERG

Other Details: _____