



Myopia Management Program

Welcome, you've been invited back to protect against severe problems linked to increasing myopia because this patient was identified as being at risk of developing high myopia. Nearsightedness (sight at near better than far) is the symptom of a far greater problem: overgrowth of the eyeball known as myopia. Myopic progression is produced by an anatomical change in the eyes during development that can lead to complications; it causes up to 120x greater risk of blindness if allowed to fester and continue to grow. **Myopia causes retinal detachments, central vision loss, glaucoma, and cataracts** at a much higher rate when vision correction is above 1.00 D (Dioptic units); for every 1.00 D of myopia the risk doubles for these severe complications. Therefore it is our goal with our Myopia Management Program to prevent anyone from gaining more than 1.00 D of minus correction. That's why we start young; **the best way to prevent high myopia is to identify risk early and manage it.** Typical progression from age 5 is 0 - 0.50 D more myopia per year, but developing children can gain over 2.00 D in under a year just like they can have a growth spurt changing their height. That's why annual eye exams for developing eyes that are trending myopic isn't frequent enough.

Several studies have demonstrated safe, efficacious use of low-dose atropine for **ages 4 and up** even though this is an off-label use of the FDA-approved pharmaceutical. Soft, daily disposable lenses with a dual focus design are now fully **FDA approved to slow progression** when started prior to becoming a teenager. The **FDA also recognizes Vision Shaping Treatment (VST)** as a myopia management tool that also normalizes vision outside the home with the peace of mind and freedom from daytime lenses. **It's not that glasses & contact lenses without these features do harm, they fix the nearsightedness; they just don't address the myopic progression.** Your doctor will tailor the program strategies that best suit the patient until maturity to an age when vision is stable. Doctors around the world are finding it imperative to offer a way to monitor myopia and intervene when future complications are preventable. **Preventing a large myopic prescription prevents the complications that accompany large myopic prescriptions and the perpetual expense of more powerful glasses every year from youth through adolescence. Myopia management is the solution to this growing problem!**

What is included?	What's NOT included?
Up to 4 additional vision visits between annual exams: 2 weeks, 3 months, 6 months & 9 months	Additional consultations for the Myopia Management Program should you need another (\$98 each)
Prescription medicated drops of low-dose atropine dispensed at the above office visits, if necessary	Eye care covered by major medical or vision insurance throughout the year or at annual exams
Any lens materials that help prevent myopic progression that are appropriate for the patient	Replace lost/broken items: Drops = \$40/month, VST Retainers = \$540/pair, & MMP CL's = \$400/quarter,
Measurements at each visit to determine we are achieving our goal of slowed myopic progression	Back-up, primary or sun/digital device-protective eyewear ordered with or without a vision plan

Enrollment Fee	4Sight iCare Monthly Fee	If dual therapy necessary
\$544	\$154	+ \$44 monthly

All progressing myopic patients shall be prescribed 90 minutes of daily outdoor activity whenever possible because we know this has at least a modest positive effect. Enrolling in the Myopia Management Program means we shall also invest our time, technology, and effort to prevent the many complications of high myopia; this investment in the patient’s future is best done with at least a 2-year commitment to measure the rate of success. Cancellation may occur at any time with **30 days written notice**, but the enrollment fee is required any time the program is started. Everyone becoming more myopic ages 4 to 24 is eligible to enroll. Even individuals with less farsightedness than desirable for their age benefit from this program. Farsightedness (hyperopia) is not typically corrected when a magnitude less than +1.00 D until the patient is older when the eyes are symmetric in young patients because it can yield effectively normal vision. Because everyone under age 24 can trend more myopic and **no amount of myopia is safe, even +0.25 D (not enough hyperopia) in a young child is concerning**. Since our founding in 2015, we have offered cycloplegic eye exams and/or recorded the amount of hyperopia in every child’s eyes so we can offer a means to track their power and know when they might achieve dangerous levels of myopia in the future. The sheer volume of individuals who suffer from complications of myopia made it the #1 pre-pandemic global health crisis; we must do all we can to prevent the eye problems associated with high minus prescriptions by reducing the number of people with high myopia. We can’t expect to completely halt all progression, but the outcome will be **20% to 100% less myopia** in every patient (with the greatest reductions in the youngest enrollees) because we did all we could to prevent harmful overgrowth of the eyes.

If you have any questions, please feel free to ask your doctor so they can be answered to your satisfaction. If your questions haven't been fully answered or you don't understand any part of this agreement, do not enroll in the program until you are comfortable. Please sign below that you’ve been educated about myopia management and understand the risks of not addressing this growing problem along with the benefits of starting the Myopia Management Program. This signed consent and initial payment must be received before the enrollee is scheduled for their first follow up visit and before any orders are placed to provide this service. There is a fee of \$98 for each additional consultation at a future date should another be necessary prior to enrolling.

Guarantor’s Signature: _____ Date: ____/____/____

Patient’s Name: _____