

Ice Ophthalmology LLC
Seema J. Ice, M.D.
Carl K. Shin, M.D.
Ophthalmology & Ophthalmic Surgery

2141 Mentor Ave.
Painesville, Ohio 44077
(440)354-6900

Dear _____:

Thank you for choosing our practice for your eye care services. In order to expedite your upcoming visit with Dr. _____ on: _____ at: _____ and to efficiently file your insurance claim(s), we are enclosing several forms for you to complete and bring with you on the day of your appointment. A list of medications is acceptable if you choose not complete the medication section on the form.

In addition to the enclosed forms, please bring with you your insurance information and your eyeglasses. We also recommend you bringing a driver if you are scheduled for a complete exam with dilating drops, as you will experience some blurred vision for a few hours following your examination. Your exam may take up to two hours to be completed.

We look forward to serving you, and if you should have any further questions regarding your appointment, please call our office.

The Office of Seema J. Ice, M.D./Carl K. Shin M.D.