





## **Myopia Management Program**

Welcome, you've been invited back to protect against severe problems linked to increasing myopia because the patient was identified as being at high risk for 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 eye that can lead to complications during development; it causes up to 120x greater likelihood for 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 (Dioptric units); 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 in their glasses. 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 body size. That's why annual eye exams for developing eyes that are trending myopic isn't enough.

Several studies have demonstrated safe, efficacious use of low-dose atropine for ages 6 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 myopia when started between before age 12. The FDA also recognizes Vision Shaping Treatment (VST) as a myopia management tool that also normalizes vision outside the home with the parental peace of mind and freedom from daytime lenses. It's not that glasses and contact lenses without these special features do harm, they fix the nearsightedness; they just don't address the myopic progression. Your doctor will tailor the program with the 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 <b>slowed</b> myopic progression	Back-up, primary or sun/digital device-protective eyewear ordered with or without a vision plan

<b>Enrollment Fee</b>	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 age 6 to 26 is eligible to enroll. Even individuals with less farsightedness than desirable for their age benefit from this program. Farsightedness (hyperopia) is not typically corrected in magnitudes less than +1.00 D until the patient is older because when the eyes are symmetric in young patients this power can yield effectively normal vision. Because everyone under age 26 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 powers and know when they might achieve dangerous levels of myopia in the future. The shear 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:	