

**North Coast Ophthalmology**

- **Please ask your patient to contact us within 5-10 business days after sending the referral, to schedule the appointment.**
- **Fax referral to: 707-445-1003**
- We are Ophthalmologists (medical doctors specializing in health of the eyes). We are NOT contracted with most Vision plans; **therefore, we are UNABLE to accept referrals for the following:**
  - **Routine Vision Exams (this would be any exam not for a medical reason); this would also include someone that is just looking to get a prescription for glasses.**
  - **Astigmatism, Myopia, Presbyopia, Blurry Vision, Failed School Exam. (If a patient has one of these diagnoses, they would need to be referred to an Optometrist, and if the optometrist finds a medical diagnosis, they can then refer the patient to us).**
- **Unless urgent, eRAF must be included in the referral for patients with Partnership Health Plan.**

Reason for Referral (Clinical Question)	“Required” Clinical Testing & Documentation	“Preferred” Additional Clinical Testing & Documentation
<b>Amblyopia</b>	Typed Demographics, recent office notes & copies of insurance card(s)	
<b>Exotropia/Exotropia</b>	Typed Demographics, recent office notes & copies of insurance card(s)	
<b>Cataracts</b>	Typed Demographics, recent office notes & copies of insurance card(s)	
<b>Glaucoma</b>	-Typed Demographics, recent office notes & copies of insurance card(s) -Copies of Visual Field Testing or Optic Nerve Scans	
<b>Diabetes</b>	Typed Demographics, recent office notes & copies of insurance card(s)	
<b>High Myopia</b>	Typed Demographics, recent office notes & copies of insurance card(s)	
<b>Headaches/Migraines</b>	Typed Demographics, recent office notes & copies of insurance card(s)	
<b>Strabismus</b>	Typed Demographics, recent office notes & copies of insurance card(s)	
<b>Infections/Growths</b>	Typed Demographics, recent office notes & copies of insurance card(s)	