



UNIVERSITY HEALTH CENTER  
The University of Georgia  
Athens, GA 30602-1755  
(706) 542-1162

NAME: \_\_\_\_\_  
UGA ID#: \_\_\_\_\_  
GENDER: \_\_\_\_\_  
DOB: \_\_\_\_\_

### CONSENT FOR VISUAL FIELDS TEST

A new, highly sophisticated computerized instrument now allows for a more thorough examination of your side vision, retinal function, and contrast sensitivity. These measurements can aid in the early detection of many disorders, especially glaucoma, eye or brain tumors or many eye-associated affects from diabetes, strokes, and high blood pressure.

We strongly encourage you to have this test performed for these reasons. If you have medical insurance, then this test is often covered, but not guaranteed. IF the doctor decides you need even more, in depth study, then he will order a "threshold" visual field, which is even more sensitive. You have a right to refuse the threshold test, but will have to sign that you did refuse. Please check your preference below, and sign and date.

\_\_\_\_\_ Yes, I want the screening test

\_\_\_\_\_ No, I do not want the screening test

\_\_\_\_\_  
Patient/Guardian Signature

\_\_\_\_\_  
Clinician/Physician Signature

\_\_\_\_\_  
Date