



ORDER FORM Ortho-K



Account Name:

Date:

Patient Name:

Patient Age:

R

Sphere

Cylinder

Axis

K₁ flat

K₂ steep

Axis flat

HVID

Eccentricity (e value) flat

Eccentricity (e value) steep

Shape factor (p value) flat

Shape factor (p value) steep

Notes:

L

Sphere

Cylinder

Axis

K₁ flat

K₂ steep

Axis flat

HVID

Eccentricity (e value) flat

Eccentricity (e value) steep

Shape factor (p value) flat

Shape factor (p value) steep

Notes :