

Optometrist Name and Address	Mode	Clinic	Doctor #	Claim #	Surname	Given Name	
	6						
HSN				Birth Date		Gender	
				MM	YY	M	F

ICD Code	Diagnosis	Date of Service			NL
		DD	MM	YY	

Referring Doctor Number	Referring Doctor Name	MSB Use Only

Type of Service - Please refer to the Payment Schedule	Service Code	v	Fee	Code	Fee	Explan Code	F.C.
Routine examination of the eyes	2U	A					
Repeat routine examination of the eyes	4U	C					
Partial examination (other than assessment of Ocular Urgencies/Emergencies)	12U	D					
Tonometry - the measurement of eye tension with a tonometer	21U	E					
Examination and Report of Visual Functions requested by SGI	23U	F					
Initial Assessment of Ocular Urgencies and Emergencies	15U	G					
Follow-up Assessment of Ocular Urgencies and Emergencies	16U	H					
Tonometry in conjunction with assessment of Ocular Urgencies/Emergencies	34U	J					
Annual exam for patients with diabetes	22U	K					
Tonometry in conjunction with annual examination for patients with diabetes	31U	L					
Optical Coherence Tomography (OCT) - bilateral - professional fee	35U	M					
Optical Coherence Tomography (OCT) - bilateral - technical fee	36U	N					
Photography - bilateral - professional fee	37U	P					
Photography - bilateral - technical fee	38U	Q					
Visual Field Testing (Screening or Threshold)	40U	R					
Post Cataract Surgical Care – Initial Visit – Left Eye	131U	S					
Post Cataract Surgical Care – Initial Visit – Right Eye	132U	T					
Post Cataract Surgical Care – Subsequent Visit – Left Eye	133U	V					
Post Cataract Surgical Care – Subsequent Visit – Right Eye	134U	W					
OCT Professional – Bilateral – with Post Cataract Surgical Care	135U	X					
OCT Technical – Bilateral – with Post Cataract Surgical Care	136U	Y					
Tonometry – Bilateral – with Post Cataract Surgical Care	137U	Z					
High Risk Medication Consultation	91U						
Junior Idiopathic Arthritis Consultation	92U						
Cycloplegic Retinoscopy – Under 11 years	115U						
Cycloplegic Retinoscopy – Age 11 – 17 years	116U						
OCT Professional – Bilateral – with High Risk Medication Consultation	190U						
OCT Technical – Bilateral – with High Risk Medication Consultation	191U						
Tonometry with Junior Idiopathic Arthritis Consultation	192U						
Virtual Care – Optometrist Assessment of Ocular Urgencies or Emergencies via secure telephone or video	810U						

If this service is within the Time Limits please indicate Previous and Current Rx below

Rx Previous Date	DD MM YY	Rx Current (New)	
Right _____	_____	Right _____	_____
Left _____		Left _____	Signature _____