



## See Clearly Guarantee and Assurance Program

We are so confident in our technology and the experience of our surgeons that we back up your vision correction procedure with our **See Clearly Guarantee and Assurance Program** at no additional charge to you.

Our **See Clearly Guarantee** is a full money back guarantee of an excellent surgical result. If you do not attain vision of 20/25 or better within your 12-month LASIK postoperative period, we will refund your entire procedure cost.

Our lifetime **Assurance Program** provides the security of knowing that if your vision ever falls below 20/40 (*20/50 or worse in distance corrected eye*), we will perform any necessary enhancement or touch-up of the original procedure at no additional charge.

### Eligibility Requirements

- The guarantee applies to wavefront-optimized LASIK or PRK procedures performed at Hoopes Vision.
- The guarantee applies to patients who have not had previous refractive surgery (e.g. LASIK, PRK, RK).
- The guarantee applies to nearsighted treatments for distance vision (i.e. farsighted and monovision treatments are excluded).
- Patient's prescription must be  $\leq 6.00$  diopters of myopia and  $\leq 3.00$  diopters of astigmatism.
- Patient's vision must be correctable to 20/20 preoperatively.

### See Clearly Guarantee Terms

- Patient must have complied with postoperative medication instructions/regimen and required follow-up examinations.
- Our guarantee is that you will achieve 20/25 or better vision with both eyes open at some point during your one year postoperative period; once you have done so, the See Clearly Guarantee is considered fulfilled.
- An enhancement procedure may be necessary within the first 12 months to achieve 20/25 vision. Guarantee is void if you decline an enhancement procedure if needed.
- Program does not guarantee 20/25 or better vision the rest of the patient's life.
- Patient must make an honest effort when vision is tested.

### Assurance Program Terms

- Patient must have an eye examination each calendar year at affiliated eye doctor's office (see list of affiliated doctors on our web page: [www.hoopesevision.com](http://www.hoopesevision.com)).
- For the Assurance Program to apply, vision must be below 20/40 (i.e. 20/50 or worse) in the eye(s) to receive enhancement.
- The change in vision cannot be due to any progressive eye diseases such as glaucoma, cataract, or macular degeneration (i.e. it must be something that can be corrected with a laser enhancement).
- Enhancement must be medically safe and advisable: patient must be free from certain conditions such as keratoconus and corneal ectasia, and must have enough available corneal tissue for safe enhancement.
- Patient must make an honest effort when vision is tested.

I acknowledge and agree to the above requirements and terms.

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Patient Name

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Date

**HOOPES VISION**

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