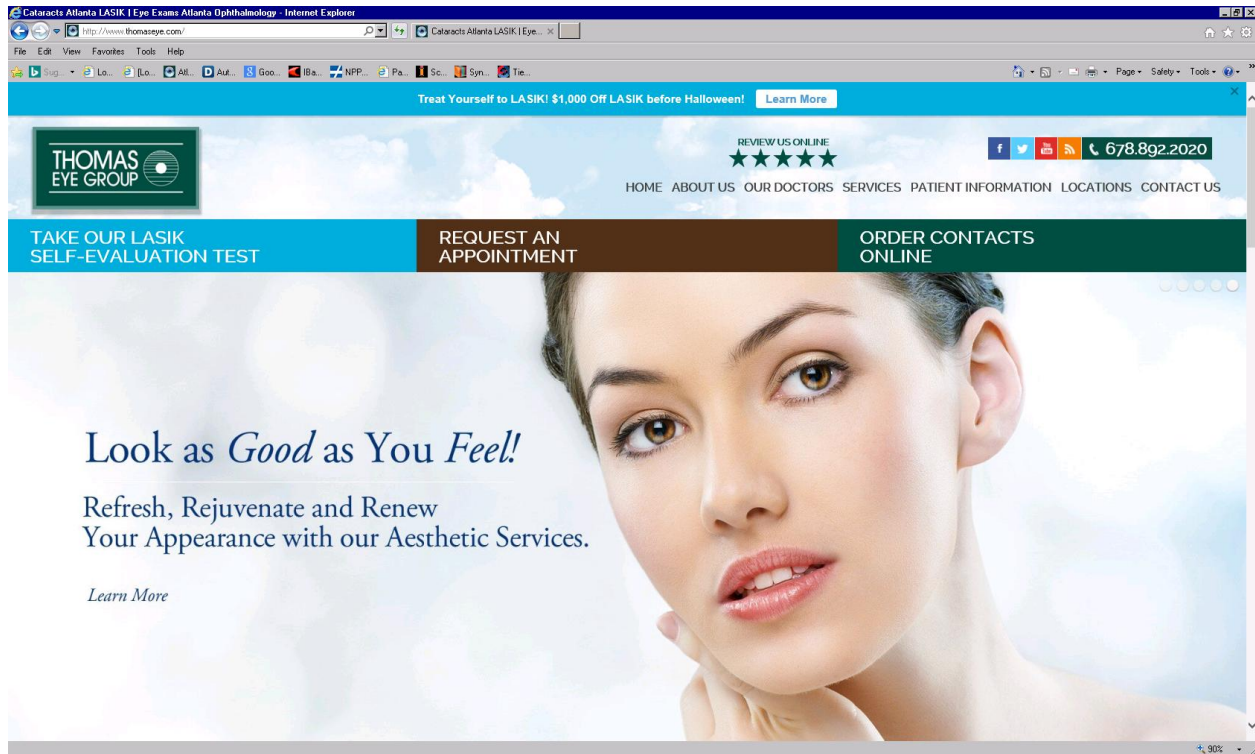
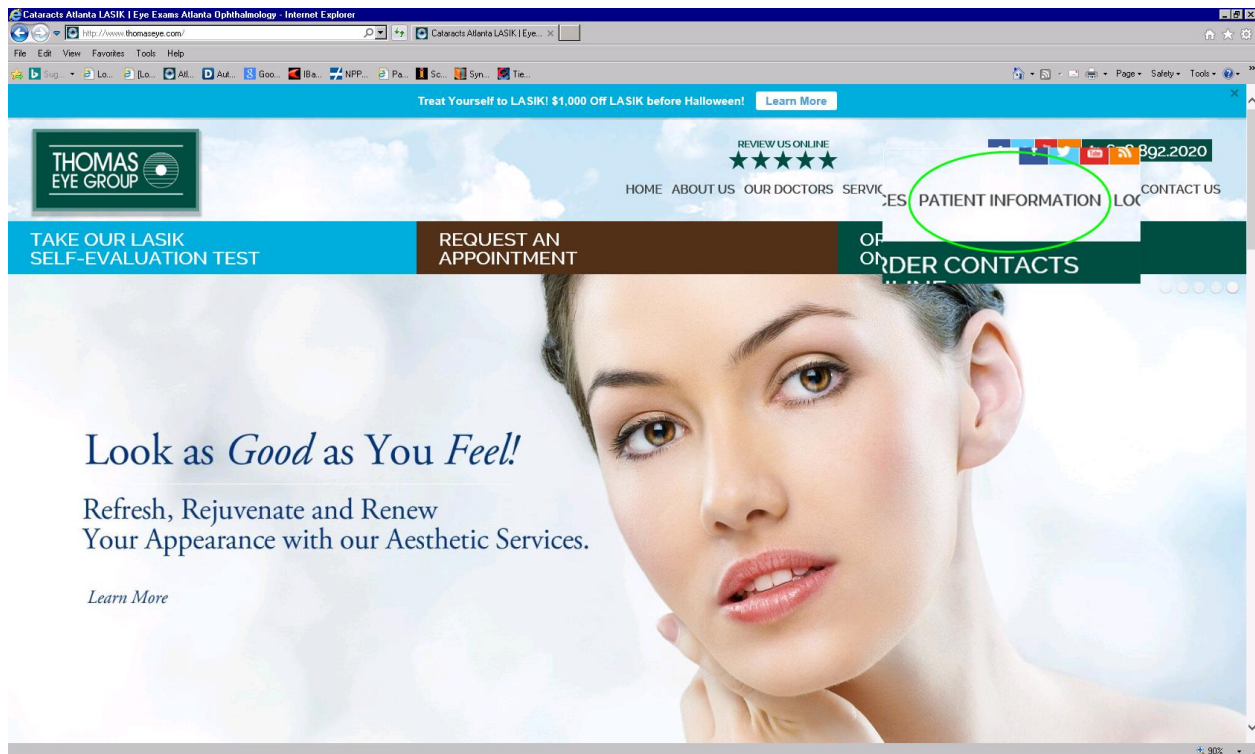
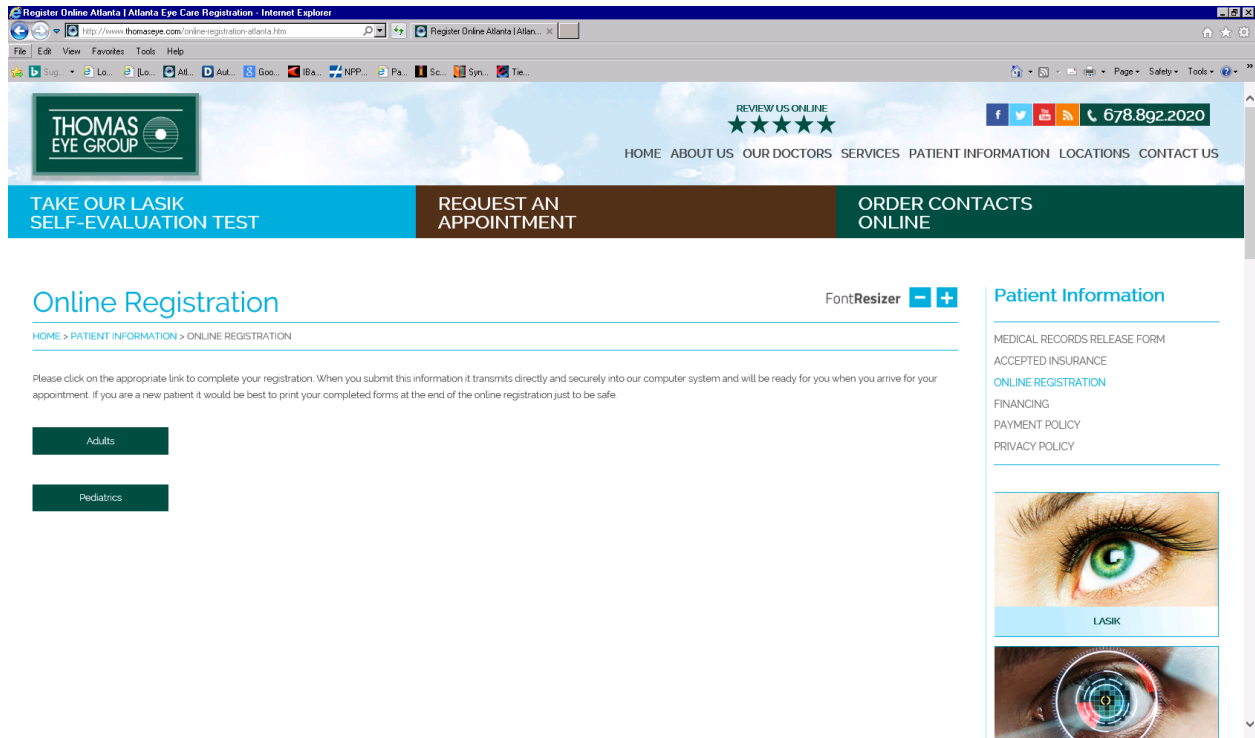


Go to our website www.thomaseye.com

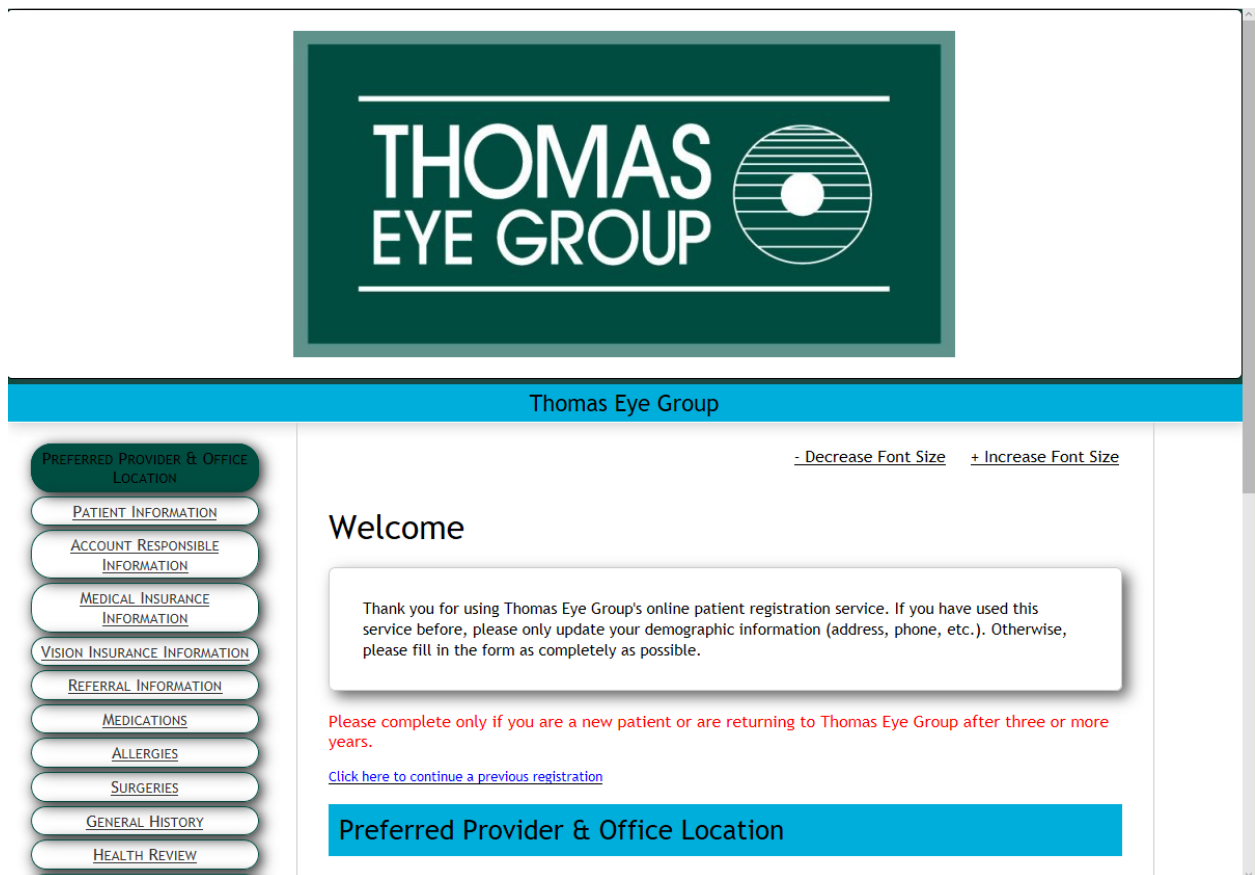


Click on **Patient Information**, then **Online Registration**.

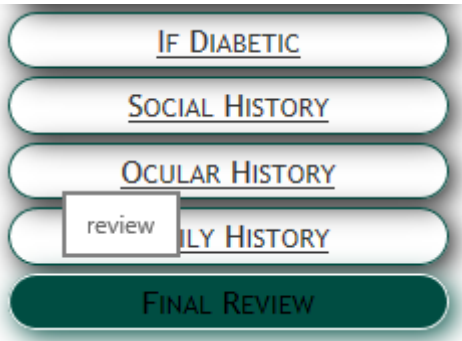




Choose either **Adult** or **Pediatrics**. A new screen will load as shown below. Please complete all sections.



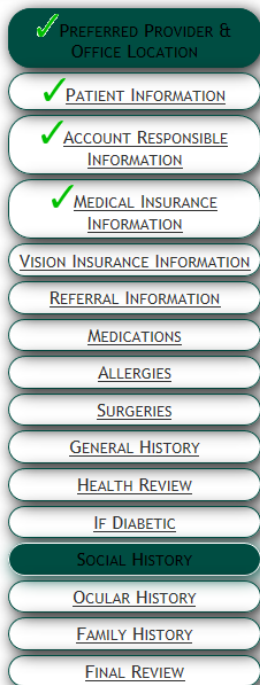
Once complete, click on **Final Review**.



If there is information that is not completed a statement will be in red showing there are missing fields.

Social History Incomplete Mandatory field(s) in this Section	
Ocular History	
Family History	
Click here to print a copy for your records.	
Please go back and submit all required information before proceeding.	

Click on section link on the left hand side to complete the information.



Complete the information required and click **Final Review** again. Take a moment to review all information. Make a note of the registration number.

[- Decrease Font Size](#) [+ Increase Font Size](#)

Note your Registration Number and Password. **Your Registration Number is: 969210.**
If for any reason you get interrupted during the process, with this number and password you may come back and pick up where you left off. If you provided an email address your registration number was sent to you.

Final Review

Please take a moment to review your information for accuracy.

Once complete and all information has been reviewed please **click here to print a copy for your records** .

[Click here to print a copy for your records.](#)

Submit Patient Record

Now click **Submit Patient Record**.

[Click here to print a copy for your records.](#)

Submit Patient Record

[Click here to print a copy for your records.](#)

Submit Patient Record

The screen will now state **registration complete**.

Registration Complete

Registration Number: 969210

Thank you for registering online. We look forward to seeing you at your visit!

CONTINUE

Click **Continue** and the screen will take you back to the website homepage.