



UEC REFERRAL SERVICE

For appointments: Call (888) 327-5533
Fax (212) 938-4020 Email: referral@sunyoft.edu

The Patient Care Facility of the SUNY/College of Optometry
33 West 42nd Street, NYC 10036 (between 5th and 6th Avenues)
www.UniversityEyeCenter.org

Date of Referral

Referred By (First & Last Name) Name of Practice/Facility

Patient Name (First & Last Name) DOB

Address of Referring Provider

Patient Address (Required) APT #

City State Zip

City State Zip

Phone # Fax #

Patient Phone # (Required) Preferred Language

E-mail Address NPI #

Member Insurance

Member ID#

Do you dispense eyeglasses at this location (Required) Yes No

Please fax copy of insurance card (front & back)

IMPORTANT! PLEASE SEND A COPY OF THE MOST RECENT EYE EXAM WITH THIS FORM

IS THIS REFERRAL FOR EMERGENT CARE (24 - 48 HRS)? REQUIRED: Yes No

I would like my patient to continue care at SUNY for the referred issue. Patient is to return to me for comprehensive care.
I would like to transfer care of this patient to SUNY.

Correspondence: (check one)

Referred to (check one):

Imaging Center only (Dx needed) Consultation Consultation & Treatment
w/ Interpretation
w/o Interpretation

Please Call
Mail Report
Fax Report
NextGen Share

Special Testing:

ONH/NFL Imaging
Macular/Retinal Imaging
Optical Biometry (IOL Master)
Corneal Topography
Pachymetry
Ultrasound Biomicroscopy
A and B Scan Ultrasonography
Fluorescein Angiography
Digital Photography
Visual Field Test
VEP
ERG/EOG (10 years & older)
Meibography

Specialty Care:

Cataract
Cornea
Contact Lenses
Myopia Control*PLS ATTACH COPY OF COMPLETE EYE EXAM + DFE RESULTS
Prosthetic Fit
Retina
Glaucoma
Neuro-ocular
Oculoplastics
Dry Eye
Hereditary Retinal & Optic Nerve Disease

Vision Therapy*PLS ATTACH COPY OF COMPLETE EYE EXAM + DFE RESULTS!

Head Trauma/Acquired Brain Injury
Learning Disabilities
Low Vision*PLS ATTACH COPY OF COMPLETE EYE EXAM + DFE RESULTS!
Infant Vision (birth to 4 years of age)
Pediatrics (5 to 13 years of age)
Pediatric Ocular Disease (<14 years)
Strabismus Surgical Consult (all ages)
Children w/Special Needs (<18 years)
Adults w/Disabilities
Primary Care/CEE (14 years & older)
Color Vision Test

Diagnoses: Patient's latest refraction: OD

Diagnosis Codes: OS

Reason(s) for Referral/Pertinent Information:

IMPORTANT! Date of last dilated fundus exam and findings:

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Participating In-

urance Programs

Aetna	EyeMed	Oxford
Affinity	Fidelis	Optum Health Vision (Spectera)
AmidaCare	Healthcare Partners (HCP)	POMCO
Avesis	Healthfirst (Medicaid only)	Senior Health Partners
Catholic Guild (Voucher)	Humana	Superior Vision (Block Vision)
Center Light	Independence Care System (ICS)	Tri-Care North Region (Healthnet)
Cigna	Liberty Health Advantage	Touchstone
Commission for the Blind (Voucher)	Magnacare	United Healthcare
Community Plan (Americhoice)	MarchVision	VESID
Coventry	Medicaid	VIPA
Davis Vision	Medicare	VNS
DentaQuest/EyeQuest	MetroPlus	VSP
Elderplan	Multiplan/PHCS	VSPM
Emblem Health (GHI/HIP)	Neighborhood Health Plan	Well Care
Empire Blue Cross/Shield	NVA	1199
Empire BC & BS HealthPlus (Amerigroup)		

How to get to the University Eye Center

- The B,D,V or F to 42nd Street and 6th Avenue
- The 4, 5, or 6 to 42nd Street / Grand Central Station
- The 1, 2, 3, 9, A, C, E, N, R, Q or W to 42nd Street / Times Square
- Metro North to Grand Central Station
- The 7 train to 5th Avenue
- The M42 and M104 buses stop half a block away
- The LIRR to Penn Station

The University Eye Center is located across the street from Bryant Park and the main branch of the New York Public Library. The address is 33 West 42nd Street, which is located between 5th and 6th Avenues. There are several public parking garages located along West 43rd Street (fees apply).

