

## **Crosslinking (CXL)**

Patient Name			
DOBDate of Ex	xam		
Surgeon			
<b>Keratoconus</b> (Unstable) <b>Ectasia</b> (from Refractive Surgery)	□ od □ od	□ os □ os	☐ Both ☐ Both
<b>ALL</b> insurance companies require that the me <b>24 months of medical records are required</b> , of an outside referring doctor and Boulder Eye S	either from Bould	er Eye Surgeons or fro	
Medical records must show <b>ALL of the follow</b> Conservative treatments tried and failed (expected as a second as a	e.g., spectacles and nough to show pro similar sources, p	ogression	
ALL insurance companies that cover CXL required Failed conservative treatment (e.g., specta Patient is 14-65 years of age		ontact lens)	
MOST insurance companies that cover CXL resto patient having best corrected vision less the Patient can no longer be correct to 20/20 A An increase of 1 D in steepest keratometry  An increase of 1 D in regular astigmatism of A myopic shift (decrease in the spherical expectation A decrease greater than or equal to 0.1 mm where other information was not available.	an 20/20 (Check of AND) value, OR evaluated by subjection of 0.50 in the back option	all that apply): ctive MR, <b>OR</b> D on subjective MR, <b>O</b>	R
Reviewer Name (Print)		Date	
Reviewer Signature			