

SWEDBERG EYE CARE - CATARACT SURGERY QUESTIONNAIRE

Please mark the appropriate answer as if you had glasses/contacts on.

NAME:	DATE OF BIRTH:	NO	YES		
VISION HISTORY			RT	LT	BOTH
Have you ever been told you have astigmatism?					
Have you ever had monovision, either with contact lenses, LASIK, or naturally?					
Have you ever had LASIK, PRK, RK, or any other surgery on your eyes?					
VISUAL FUNCTIONING:					
Do you have difficulty with the following activities (even WITH glasses)?					
NEAR VISION					
Reading small print (i.e. labels on medications, telephone books, food labels, etc.)					
Reading a newspaper or books					
Reading a large-print book, large-print newspaper, or large numbers on a telephone					
Recognizing people when they are in close proximity					
Seeing steps, stairs, or curbs					
Applying makeup					
Doing fine-detailed work (i.e. sewing, knitting, cross-stitch, watchmaking, etc.)					
Writing checks or filling out forms					
INTERMEDIATE VISION					
Car dashboard					
Playing games (i.e. bingo, cards, dominos, etc.)					
Using Computer					
Shopping					
DISTANCE VISION					
Taking part in sports (i.e. bowling, tennis, golf, etc.)?					
Watching Television					
Depth perception and trouble judging distance					
Watching movies, going to the theater					
Viewing scenery or taking photographs					
Reading traffic signs, or store signs					

SWEDBERG EYE CARE – LIFESTYLE AND VISION QUESTIONNAIREPlease **CIRCLE** the applicable answers.**NAME:****DATE OF BIRTH:****LIFESTYLE**

Employed

Retired

DRIVING - Do you currently drive a car and/or operate a vehicle?**NO - When did you stop driving?**

Less than 6 months ago

6-12 months ago

More than 1 year ago

YES - How much difficulty do you have driving AT NIGHT, because of your vision?

No difficulty

Little
difficultyModerate
difficultyGreat
difficulty

Cannot Perform

YES - How much difficulty do you have driving DURING THE DAY, because of your vision?

No difficulty

Little
difficultyModerate
difficultyGreat
difficulty

Cannot Perform

What are your favorite hobbies and activities?

Reading

Computer/Tablet

Crossword Puzzles

Drawing/Painting

Photography

Actual Puzzles

Watersports

Golf or other sports

Playing with
grandchildren

OTHER:

How would you best describe your personality type?

Easygoing

Flexible

Organized
Planner

Perfectionist