RELEASE 1 · PART OF AN ONGOING SERIES

# Carlin Vision Call Center Manual

## Release 1: Routine vs. Medical Scheduling

- Routine vs. Medical Classification
- Scheduling and Triage Scripts 1–19
- Decision Trees DT-1 through DT-4
- Standard Operating Procedures
- Additional modules in development

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# Section 4 — Scripts 1–8 | Scheduling and Triage

Scripts 1–8 cover all inbound scheduling and triage calls. Every call begins with the Universal Call Opening (Steps 1–5). After the routing decision at Step 5, staff goes directly to the matching numbered script. All scripts were approved by Dr. Richard Carlin, July 2026.

## UNIVERSAL CALL OPENING · Every call begins here — Steps 1–5

*This opening applies to every inbound call without exception. Do not select a numbered script until Step 5 tells you where to go.*

Follow this opening for every inbound call. Do not select a numbered script until Step 5 tells you where to go.

### STEP 1 — Greeting

**STAFF:** Thank you for calling Carlin Vision, this is [Name]. How may I help you today?

***PATIENT:*** *[Patient states reason for calling]*

**STAFF:** I'm happy to help with that. Let me ask you a few questions to make sure we get you scheduled correctly.

### STEP 2 — Patient type, name, and date of birth

**STAFF:** Have you been seen here at Carlin Vision before?

***PATIENT:*** *Yes, I've been a patient here. / No, I'm new to the practice.*

IF NEW PATIENT:

**STAFF:** Wonderful! We're so glad you called. **STAFF:** May I have your name?

**STAFF:** And your date of birth, [Name]?

**STAFF:** I'll need to get a little information from you. What's your current address?

**STAFF:** And the best phone number to reach you?

**STAFF:** If we happen to get cut off, is this the best number?

**STAFF:** And an email address for your appointment reminders?

- Date of birth is used to locate the patient in Compulink and verify the 55-plus rule without asking age directly.
- Quick reference for 2026: patients born in 1971 or earlier are 55 or older. Update this cutoff year every January.

IF RETURNING PATIENT:

**STAFF:** Welcome back! May I have your name and date of birth so I can confirm your information?
**STAFF:** Can you confirm your address for me?
**STAFF:** And the best phone number to reach you?
**STAFF:** If we happen to get cut off, is this the best number?
**STAFF:** And an email address for your appointment reminders?

### STEP 3 — Chief complaint

**STAFF:** What can we help you with today, [Name]?

**STAFF:** Tell me a little about what's been going on.

***PATIENT:*** *[Patient describes reason for calling]*

### STEP 4 — Screening

**STAFF:** Have you noticed any discomfort, changes in your vision, redness, or anything else that's been concerning you?

## TRIAGE SCRIPTS 4–8 · Exit Universal Opening immediately on urgent symptom

*Leave the Universal Call Opening the moment an urgent symptom is reported. All triage visits are medical eye exams.*

### Standard Timing Grid — Scripts 4, 5, 7

| Onset | No Loss / No Pain | Pain or Vision Loss | Worsening |
|---|---|---|---|
| Past 24 hours | Today | ASAP | ASAP |
| 1 day to 1 week | 1–2 Days | Today | ASAP |
| 1 week to 1 month | Within 1 week | Today / Escalate | Today / Escalate |
| More than 1 month | 2–3 weeks | 1–2 Days / Escalate | Escalate |

■ **URGENT EXIT — Stop. Go to triage script immediately.**

■ If no urgent symptoms → continue to Step 5.

### STEP 5 — Classify and route

### ROUTING DECISION — Go to the correct script now:

# Script 1 — Routine Eye Exam

**Scheduling — Call Center**

*Used when the patient has no symptoms, no known eye disease, and is under 55 or has no blurred vision. This is a wellness or glasses check. Billed to vision plan.*

## STEP 1 — Confirm visit type

**STAFF:** I'll get you set up for a routine eye exam.

## STEP 2 — Doctor selection

- RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.
- NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.
- URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

## STEP 3 — Insurance

**STAFF:** May I get your insurance information?

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- If we do not participate in their plan → offer self-pay rates and close warmly.
- *Self-pay rates: $160 new patient, $140 returning within 3 years.*

## STEP 4 — Close

**STAFF:** Now, let's find a time that works for you, [Name].

**STAFF:** You're all set! Your routine eye exam with Dr. [Last Name] is scheduled for [date and time]. We look forward to seeing you. If anything comes up before your appointment, don't hesitate to give us a call.

**STAFF:** Before we let you go — would you like a complimentary evaluation to see if you're a LASIK candidate?

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork. We appreciate you completing this before your appointment — it will allow for a more efficient visit.

■ If the appointment is more than two weeks out: "If an earlier opening comes up, I can add you to our wait list. Would that be helpful?"

■ *END — Appointment confirmed. Document as required.*

### ■ PUSHBACK: "Why do you need my medical insurance? It's just a routine exam."

***PATIENT:*** *Why do you need my medical insurance for a regular visit?*

**STAFF:** Sometimes during the exam our doctors may notice something they want to take a closer look at. If that happens, we want to make sure we already have everything on file for you — no delays, no extra steps on your end.

### ■ PUSHBACK: "I don't have insurance — can I still be seen?"

***PATIENT:*** *I don't have insurance. Can I still come in?*

**STAFF:** Of course! We see self-pay patients and are glad to work with you. For a new patient, the rate is $160. That covers a complete eye health evaluation — cataracts, glaucoma, other eye diseases, and your prescription update.

**STAFF:** If you've been seen here within the last three years, the rate is $140.

**STAFF:** If any specialized testing is needed, we'll go over that with you at the time of your visit.

■ *Self-pay rates: $160 new patient, $140 returning within 3 years.*

# Script 2 — Medical Eye Exam

**Scheduling — Call Center**

*Used when the patient reports symptoms, a known eye condition, or follow-up care. Billed to medical insurance. Includes explanation of billing and option to switch to routine benefits if no medical problem is found.*

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## STEP 1 — Classify and set expectations

**STAFF:** Based on what you've described, [Name], our doctors will want to do a thorough evaluation. I'll schedule this as a medical eye exam.

## STEP 2 — Doctor selection

- RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.
- NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.
- URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

## STEP 3 — Insurance

**STAFF:** May I get your insurance information? As this is a medical exam, it will be billed to your medical insurance. And if the doctor checks everything and it turns out there are no medical problems, we can always switch it over and use your routine vision benefit if you have any.

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- If we do not participate in their plan → offer self-pay rates and close warmly.
- *Self-pay rates: $160 new patient, $140 returning within 3 years.*

## STEP 4 — Close

**STAFF:** Now, let's find a time that works for you, [Name].

**STAFF:** You're all set! Your medical eye exam with Dr. [Last Name] is scheduled for [date and time]. We look forward to seeing you. If your symptoms get worse before your appointment, please call us right away.

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork. We appreciate you completing this before your appointment — it will allow for a more efficient visit.

■ If the appointment is more than two weeks out: "If an earlier opening comes up, I can add you to our wait list. Would that be helpful?"

■ *END — Appointment confirmed. Document as required.*

### ■ PUSHBACK: "Why is it a medical exam? Can I just come in as routine?"

***PATIENT:*** *I don't want to use my medical insurance — can't I just come in for a regular visit?*

**STAFF:** Based on what you described, there's most likely an underlying medical cause our doctors need to evaluate properly. If they check everything and it turns out there are no medical problems, we can always switch it over and use your routine vision benefits.

**STAFF:** If you'd like, I can have our benefits specialist give you a call before your visit to walk you through your specific coverage.

### ■ PUSHBACK: Returning patient: "I just want my glasses updated — I don't need a full exam."

***PATIENT:*** *I just need a prescription update. That's all.*

■ If the patient has a known medical diagnosis on record → must still be scheduled as medical.

**STAFF:** We'll make sure your prescription gets updated during your visit, [Name]. The reason I'm scheduling this as a medical exam is that our doctors will also need to check on your [condition] at the same time — so everything gets taken care of in one appointment.

### ■ PUSHBACK: "I don't have insurance — can I still be seen?"

***PATIENT:*** *I don't have insurance. Can I still come in?*

**STAFF:** Of course! We see self-pay patients and are glad to work with you. For a new patient, the rate is $160. That covers a complete eye health evaluation — cataracts, glaucoma, other eye diseases, and your prescription update.

**STAFF:** If you've been seen here within the last three years, the rate is $140.

**STAFF:** If any specialized testing is needed, we'll go over that with you at the time of your visit.

■ *Self-pay rates: $160 new patient, $140 returning within 3 years.*

# Script 3 — Age 55+ Blur Redirect

**Scheduling — Call Center**

*Used when a patient age 55 or older reports blurred vision as their chief complaint — even if they ask for routine. After age 55, new vision changes require a medical evaluation per Dr. Carlin's confirmed protocol.*

- Quick reference for 2026: patients born in 1971 or earlier are 55 or older. Update this cutoff year every January.
- *All patients age 55 or older with blurred vision are scheduled as a medical eye exam.*

## STEP 1 — Redirect to medical and address prescription

- Date of birth from Step 2 confirms patient is 55 or older. Apply the age-based blur rule.

**STAFF:** After about age 55, vision generally remains about the same unless there is an underlying medical condition. Our doctors will need to do a thorough examination to rule out any medical cause.

**STAFF:** If it turns out there are no medical problems, we can always switch it over and use your routine vision benefits.

**STAFF:** And if you do need an updated prescription, the doctor can take care of that during the same visit.

## STEP 2 — Doctor selection

- RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.
- NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.
- URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

## STEP 3 — Insurance

**STAFF:** May I get your insurance information?

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- If we do not participate in their plan → offer self-pay rates and close warmly.
- *Self-pay rates: $160 new patient, $140 returning within 3 years.*

### STEP 4 — Close

**STAFF:** Now, let's find a time that works for you, [Name].

**STAFF:** You're all set! Your medical eye exam with Dr. [Last Name] is scheduled for [date and time]. We look forward to seeing you. If anything comes up before your appointment, don't hesitate to give us a call.

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork. We appreciate you completing this before your appointment — it will allow for a more efficient visit.

■ If the appointment is more than two weeks out: "If an earlier opening comes up, I can add you to our wait list. Would that be helpful?"

■ *END — Appointment confirmed. Document as required.*

#### ■ PUSHBACK: "I just want a routine exam — I don't want to use my medical insurance."

***PATIENT:*** *Can't I just come in for a regular checkup? I just want to use my vision benefits.*

**STAFF:** I completely understand, [Name]. The reason we're handling this a little differently is that you've mentioned a change in your vision. Our doctors want to make sure they're evaluating any possible cause — not simply updating the prescription. If it turns out there are no medical problems, we can always switch it over and use your routine vision benefits.

**STAFF:** If you have any questions about your specific coverage, I can have our benefits specialist give you a call before your appointment.

#### ■ PUSHBACK: "I've always had a routine exam here — why is this different?"

***PATIENT:*** *I've been coming here for years and it's always been routine.*

**STAFF:** The reason today is a little different, [Name] — you've mentioned a change in your vision, and our doctors want to make sure they're not missing anything. If it turns out there are no medical problems, we'll switch it right over and use your routine vision benefits.

#### ■ PUSHBACK: "I don't have insurance — can I still be seen?"

***PATIENT:*** *I don't have insurance. Can I still come in?*

**STAFF:** Of course! We see self-pay patients and are glad to work with you. For a new patient, the rate is $160. That covers a complete eye health evaluation — cataracts, glaucoma, other eye diseases, and your prescription update.

**STAFF:** If you've been seen here within the last three years, the rate is $140.

**STAFF:** If any specialized testing is needed, we'll go over that with you at the time of your visit.

■ *Self-pay rates: $160 new patient, $140 returning within 3 years.*

# Script 4 — Triage: Vision Problem

**Triage — Urgent — Call Center**

*Used for blurred vision with urgency triggers, flashes, floaters, field defects, or double vision. All triage visits are medical eye exams. Exit the Universal Opening immediately when any urgent symptom is identified.*

## STEP 1 — Acknowledge and get name

**STAFF:** I hear you, [Name]. Let me make sure we get you the right help.

■ If name not yet collected from Universal Opening: get it now. Use it throughout the call.

## STEP 2 — Clarify symptoms

**STAFF:** Can you describe what you're experiencing? Are you seeing blur, flashing lights, floating shapes, missing areas of your vision, or double vision?

## STEP 3 — Onset (required on every call)

**STAFF:** When did this start — in the last 24 hours, over the past few days, or longer?

■ Capture onset bucket. Apply timing grid above.

## STEP 4 — Pain and worsening

**STAFF:** Is there any pain or pressure in your eye? And has it been getting worse?

## STEP 5 — Flashes and floaters (always ask)

**STAFF:** Are you seeing any flashing lights or any new floating spots or shapes?

■ Flashes and floaters must always be asked about and documented — even if the patient did not mention them.

## STEP 6 — Doctor selection

■ RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.

■ NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.

■ URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

### STEP 7 — Insurance

**STAFF:** May I get your insurance information?

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- *Self-pay rates: $86-$260 for new patient, established patient is $86-$216 without a discount. There is a 15% self pay discount.*

### STEP 8 — Schedule and close

**STAFF:** Based on what you've described, [Name], I want to make sure our doctors see you today or within the next day or two. Let me get you scheduled right now.

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork.

**STAFF:** You're all set — your appointment with Dr. [Last Name] is at [date and time]. Please call us right away if anything gets worse before then.

- *END — Appointment confirmed. Document as required.*

### PUSHBACK: Patient declines recommended timing

***PATIENT:*** *I don't think it's that serious. I'll wait and see.*

**STAFF:** I understand, [Name], and I respect your decision. I do want you to know that with what you are describing, our doctors would really want to see you soon. Please call us back right away if anything changes or gets worse.

- RETURNING PATIENT: Document recommendation and patient's response in the scheduling comment box.
- NEW PATIENT: No documentation required — no Compulink record exists.

# Script 5 — Triage: Eye Trauma

**Triage — Urgent — Call Center**

*Used when the patient reports any eye injury. Ask about vision loss first — if present, schedule ASAP regardless of other factors.*

## STEP 1 — Acknowledge and get name

**STAFF:** I'm glad you called. Let's make sure we take care of you right away, [Name].

■ If name not yet collected: get it now.

## STEP 2 — What happened

**STAFF:** Can you tell me what happened — was it a hit to your eye, something that got in your eye, or another type of injury?

## STEP 3 — Vision change (ask first — most critical)

**STAFF:** Is your vision affected right now — any change at all in what you're seeing?

■ ANY vision loss or change → ASAP. Do not apply the timing grid.

■ **URGENT EXIT — Stop. Go to triage script immediately.**

■ If no vision loss → continue with onset questions and apply timing grid.

## STEP 4 — Pain

**STAFF:** Is there any pain?

## STEP 5 — Onset

**STAFF:** When did this happen — in the last 24 hours, or earlier?

## STEP 6 — Doctor selection

■ RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.

■ NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.

■ URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

### STEP 7 — Insurance

**STAFF:** May I get your insurance information?

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- *Self-pay rates for new patient $86-$260 and established patient is $86-$212 without a discount. There is a 15% self pay discount for the visits.*

### STEP 8 — Schedule and close

**STAFF:** Based on what you've described, [Name], I want to make sure our doctors see you today or as soon as possible. Let me get you scheduled right now.

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork.

**STAFF:** You're all set — your appointment with Dr. [Last Name] is at [date and time]. Please call us right away if anything gets worse before then.

- *END — Appointment confirmed. Document as required.*

### ■ PUSHBACK: Patient declines recommended timing

***PATIENT:*** *I don't think it's that serious. I'll wait and see.*

**STAFF:** I understand, [Name], and I respect your decision. I do want you to know that with what you are describing, our doctors would really want to see you soon. Please call us back right away if anything changes or gets worse.

- RETURNING PATIENT: Document recommendation and patient's response in the scheduling comment box.
- NEW PATIENT: No documentation required — no Compulink record exists.

# Script 6 — Triage: Red Eye

**Triage — Urgent — Call Center**

*Used when the patient reports a red or pink eye. Urgency is feature-driven (not onset-based): ask about pain, vision, discharge, and onset before assigning timing.*

## STEP 1 — Acknowledge and get name

**STAFF:** I hear you, [Name]. Let me ask you a few questions to make sure we get you the right help.

■ If name not yet collected: get it now.

## STEP 2 — Pain (ask first)

**STAFF:** Is the eye painful?

■ Pain → Today.

## STEP 3 — Vision

**STAFF:** Is your vision blurry in that eye?

■ Blurred vision → Today regardless of pain or onset.

## STEP 4 — Discharge

**STAFF:** Is there any discharge — any crust, drainage, or sticky feeling around the eye?

## STEP 5 — Onset

**STAFF:** When did the redness start?

## STEP 6 — Doctor selection

■ RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.

■ NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.

■ URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

### STEP 7 — Insurance

**STAFF:** May I get your insurance information?

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- *Self-pay rates for new patient is $86-$260 and $86-$212 for an established patient without discount. There is a 15% discount for self pay patients.*

### STEP 8— Schedule and close

**STAFF:** Based on what you've described, [Name], I want to make sure our doctors see you today or within the next day or two. Let me get you scheduled right now.

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork.

**STAFF:** You're all set — your appointment with Dr. [Last Name] is at [date and time]. Please call us right away if anything gets worse before then.

- *END — Appointment confirmed. Document as required.*

### ■ PUSHBACK: Patient declines recommended timing

***PATIENT:*** *I don't think it's that serious. I'll wait and see.*

**STAFF:** I understand, [Name], and I respect your decision. I do want you to know that with what you are describing, our doctors would really want to see you soon. Please call us back right away if anything changes or gets worse.

- RETURNING PATIENT: Document recommendation and patient's response in the scheduling comment box.
- NEW PATIENT: No documentation required — no Compulink record exists.

# Script 7 — Triage: Headache with Possible Eye Involvement

**Triage — Urgent — Call Center**

*Used when the patient reports a headache that may involve the eyes or vision. Ask about onset first, then visual symptoms.*

## STEP 1 — Acknowledge and get name

**STAFF:** I'm glad you called, [Name]. Let me ask you a couple of things.

■ If name not yet collected: get it now.

## STEP 2 — Onset

**STAFF:** When did the headache start — in the last 24 hours, over the past few days, or longer?

## STEP 3 — Visual symptoms (escalate if present)

**STAFF:** Along with the headache, are you having any changes in your vision — any blurring, flashing lights, or double vision?

■ Visual symptoms present → escalate immediately to clinician on duty. Do not guess.

■ **ESCALATE — Transfer to clinician or technician on duty.**

■ No visual symptoms → apply standard timing grid and schedule accordingly.

## STEP 4 — Doctor selection

■ RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.

■ NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.

■ URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

## STEP 5 — Insurance

**STAFF:** May I get your insurance information?

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- *Self-pay rates: $160 new patient, $140 returning within 3 years.*

## STEP 6 — Schedule and close

**STAFF:** Based on what you've described, [Name], I want to make sure our doctors see you today or within the next day or two. Let me get you scheduled right now.

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork.

**STAFF:** You're all set — your appointment with Dr. [Last Name] is at [date and time]. Please call us right away if anything gets worse before then.

- *END — Appointment confirmed. Document as required.*

### PUSHBACK: Patient declines recommended timing

***PATIENT:*** *I don't think it's that serious. I'll wait and see.*

**STAFF:** I understand, [Name], and I respect your decision. I do want you to know that with what you are describing, our doctors would really want to see you soon. Please call us back right away if anything changes or gets worse.

- RETURNING PATIENT: Document recommendation and patient's response in the scheduling comment box.
- NEW PATIENT: No documentation required — no Compulink record exists.

# Script 8 — Triage: Change in Appearance

**Triage — Urgent — Call Center**

*Used when the patient reports a change in the appearance of their eye or eyelid. Enlarged pupil = Today always. Swollen eyelid with pain = Today always (standalone trigger, confirmed Dr. Carlin).*

- *Swollen eyelid with pain = Today. Pain is a standalone Today trigger regardless of onset.*

## STEP 1 — Acknowledge and get name

**STAFF:** I'm glad you called, [Name]. Let's make sure we get you seen.

- If name not yet collected: get it now.

## STEP 2 — What did the patient notice

**STAFF:** Can you describe what you noticed — is it a change in the size of your pupil, swelling around your eye, or something else?

## STEP 3 — Enlarged pupil

- Enlarged pupil = Today ALWAYS. Do not apply the timing grid.

**STAFF:** [Name], an enlarged pupil is something our doctors want to evaluate right away. I'm going to get you in today.

## STEP 4 — Swollen eyelid: pain

**STAFF:** Is there any pain or discomfort with the swelling?

- Pain → Today (standalone trigger). Pain overrides onset grid.

## STEP 5 — Onset and worsening

**STAFF:** When did you first notice this?

**STAFF:** Has it been getting worse?

- Worsening → escalate or move to more urgent slot regardless of onset bucket.

## STEP 6 — Doctor selection

- RETURNING PATIENT: State the doctor. Do not ask. "You've been seen with Dr. [Last Name] — I'll get you scheduled with them." Change only if patient requests it.
- NEW PATIENT: "Do you have a doctor you'd like to see, or would you like the first available appointment?" Default: first available. Honor preference if stated.
- URGENT: Timing overrides doctor preference. Offer another Carlin Vision doctor if preferred doctor is unavailable.

### STEP 7 — Insurance

**STAFF:** May I get your insurance information?

- Collect both vision and medical insurance. If patient has only one type, note it and continue.
- *Self-pay rates: $86-$260 for a new patient and $86-$212 without discount. There is a 15% self pay discount for the visits.*

### STEP 8 — Schedule and close

**STAFF:** Based on what you've described, [Name], I want to make sure our doctors see you today or within the next day or two. Let me get you scheduled right now.

**STAFF:** Please go to our website, www.carlinvision.com. At the top of the page, go to About, then Forms to update your patient paperwork.

**STAFF:** You're all set — your appointment with Dr. [Last Name] is at [date and time]. Please call us right away if anything gets worse before then.

- *END — Appointment confirmed. Document as required.*

### PUSHBACK: Patient declines recommended timing

***PATIENT:*** *I don't think it's that serious. I'll wait and see.*

**STAFF:** I understand, [Name], and I respect your decision. I do want you to know that with what you are describing, our doctors would really want to see you soon. Please call us back right away if anything changes or gets worse.

- RETURNING PATIENT: Document recommendation and patient's response in the scheduling comment box.
- NEW PATIENT: No documentation required — no Compulink record exists.