



EMPIRE EYE
PHYSICIANS

EmpireEye.com

COEUR D'ALENE OFFICE

2175 N. Main St. (Riverstone), Coeur d'Alene, ID 83814
Phone (208) 664-9888 | Fax (208) 666-0816

SPOKANE VALLEY OFFICE

1414 N. Houk Rd., Suite 103, Spokane Valley, WA 99216
Phone (509) 928-8040 | Fax (509) 928-0784

Patient Demographics Information Form

Patient Information

Legal Name _____ Date ____/____/____
Last First MI
Preferred _____ Male Female
Birth Date ____/____/____ Age ____ Social Security ____/____/____
Employer/School _____ Occupation _____
How did you choose this office? Referred by Patient Referred by Doctor Location Other
Medical Doctor _____ Referring Physician (if applicable) _____
Last Medical Exam ____/____/____ Last Eye Exam ____/____/____
Marital Status Married (Spouse Name) _____ Single Widowed Divorced

Contact Information

Billing Address _____ Primary Phone _____
City/ State/ ZIP _____ Alt. Phone _____
Email _____

Emergency Contacts

Name _____ Relationship _____ Phone _____
Name _____ Relationship _____ Phone _____

Patients Under 18 Years

Parent/ Guardian Name _____ Phone _____
Relationship _____
Street Address _____ City /State/ Zip _____
(If different than above)

Insurance

Primary Insurance _____ Secondary Insurance _____
Insurance ID# _____ Insurance Policy # _____
Policy Group # _____ Policy Group # _____
Policy Holder Name _____ Policy Holder Name _____
Relationship _____ Relationship _____

For Office Use Only MRN _____ Picture on File? Yes No Refused