

# GROTON EYE CENTER, LLC

1041 Poquonnock Road  
Groton, CT 06340  
860 445 1000  
FAX 860 445 4991

## PATIENT CONTACT INFORMATION

In order to contact you regarding test results or any other pertinent information, please provide current phone numbers. Please let us know if you have authorized us to leave a voicemail message at your contact numbers.

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Authorization to leave Message: YES \_\_\_\_\_ NO \_\_\_\_\_