

Prescription Order Form

Company:

Phone:

Purchase Order #:

Patient Name:

Date:

Ship to Address:

City:

State:

Zip:

Glasses Model #:

Lead Equivalency: .75 mm LE

Type of Script:

Single Vision

Bifocal

Bifocal Progressive

Sphere		Cylinder		Axis		Bifocal/Progressive Add	
R						R	
L						L	

Right		Left		Total		Segment Height	
PD							

PD | Pupillary Distance or interpupillary distance (IPD) is the distance (the industry standard is to measure in millimeters) between the centers of the pupils in each eye. This measurement is used when preparing to make prescription eyeglasses.

SH | Segment Height, also known as Seg Height or SH, is the vertical measurement in millimeters from the bottom of the lens in your frames, to the beginning of the progressive addition on a progressive lens, or the top line of a lined bifocal

IMPORTANT

PD MUST BE INCLUDED for Single Vision. PD & SEGMENT HEIGHT MUST BE INCLUDED for Bifocal/Progressive.

In order to process prescription orders, we must have the dispensing opticians signature:

Dispensing Opticians Signature_____

Please mail or fax the signed form to::

Infab
1040 Avenida Acaso
Camarillo, CA 93012
Tel: (805) 987-5255
Fax: (805) 482-8424