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Patient Name__________________________
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□ David C. Brown, M.D., F.A.C.S.
  Medical Director, Cataract and Refractive Surgeon
□ Juan Fernandez De Castro, M.D.
  Cataract, Cornea and Refractive Surgeon
□ Allison Yee, M.D.
  Cataract, Cornea and Refractive Surgeon
□ Oculoplastic and Reconstructive Surgery
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Forms/MD Ref MC 7.3.18
Map and directions available at www.ecof.com

Eye Centers of Florida