

# MAXIVISION EYE HOSPITAL

0254157

UHID-1996173

Ph : +91-40-27763677

Room No. :

## CASE SHEET

Arrival Time : 6:54

Doctor : DR. Ram Kumar

Date : 30/6/12

Ref :

MR No. 0254157

Name : Ms. K. Alekhyia

Gender : F

DOB :

Address : Ramanthapur.

Occupation :

Age 42yrs

Ph. 9866305901

e-mail :

AR : Right =

Left =

## PRESENT GLASSES PRESCRIPTION :

	SPHERE	CYL	AXIS	ADD	CVA
Right					
Left					

## COMPLAINTS :

401-1007 Blurring V

Past History :

DILAR T R -2.25/-0.50x180  
L -2.25/-0.50x35

## NEW PRESCRIPTION :

	UVA	SPHERE	CYL	AXIS	ADD	CVA
Right		2.75				6/6
Left		2.75				6/6

ALLERGIES : Nil : ☐ Penicillin : ☐ Xylocaine : ☐ Sulpha : ☐ Atropine : ☐ Drosyn : ☐

Others :

NIDDM : ☐ IDDM : ☐ Thyroid : ☐ CVA : ☐ Asthma : ☐ Heart Disease : ☐ Any other infection : ☐

Fever : ☐ Recent Cough & Cold : ☐ HTN : ☐

## ON ANY DRUGS :

Anticoagulants : ☐ Aspirin : ☐ Clopidogrel : ☐ Dipyridamole : ☐ Ticlopidine : ☐

Others :

Advised to stop anticoagulants 4 days before Surgery and 4 days after surgery ☐

Dominant eye : Right : ☐ Left : ☐

## OCULAR EXAMINATION

OCULAR MOVEMENTS :

FULL ☐

Restricted ☐

RCS : ☐

RDS : ☐

LCS : ☐

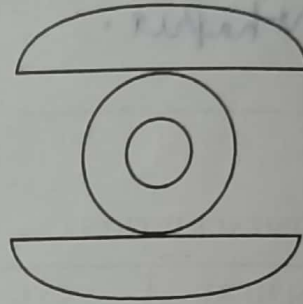
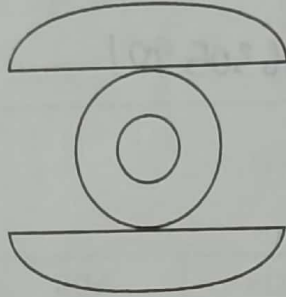
LDS : ☐

OTHERS :

SAC WASHOUT (Syringing) RE

LE

Anterior Segment



LIDS

CONJ

CORNEA

AT

AC

IRIS

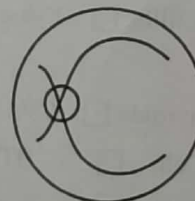
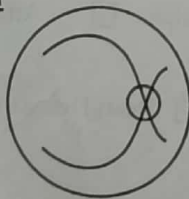
PUPIL

LENS

VITREOUS

RETINA

## FUNDUS EXAMINATION



Provisional - Diagnosis :

PMT on Flakdy

TREATMENT & ADVISE :

# INVESTIGATIONS

Keratometry

RE : K<sub>1</sub>H  
K2V

LE : K<sub>1</sub>H  
K2V

'A' Scan

AL

Formula  
SRK II ☐ SRK T ☐

PCIOL

Binkhorst - II ☐

ACIOL

Ultrasound Pachy  
Specular Microscope

RE :

LE :

RE : Cells

LE : Cells

Pachy

Pachy

Orb Scan Attached RE

RE : ☐

LE : ☐

Aberrometry Report

RE : ☐

LE : ☐

GDX Report

RE : ☐

LE : ☐

B Scan Report

RE : ☐

LE : ☐

FFA Report

RE : ☐

LE : ☐

SURGERY NOES :

RE : ☐

LE : ☐

Investigations	Values	Normal Values
Hb%		Males 13-18 gms% Females 11-16 gms% Infants 13-19 gms%
BT		1-3 min
CT		3-7 min
CBP		
CUE		
ESR		
FBS		60-110 mgs%
PPBS		110- 165 mgs%
RBS		Upto 160 mgs%
Glycosylated Hb		
HBs ag		
HIV		
CHEST 'X' RAY		
ECG		

NAME

04\_DEC\_2025 AM 11:15

NO. 4902

SN: 4774868

REF. DATA

VD: 12.00 CYL: (-)

<R>	S	C	A
-	5.00	- 3.50	40
-	5.00	- 3.75	40
-	5.00	- 3.50	40
-	5.00	- 3.50	40
	S. E.	- 6.75	

<L>	S	C	A
-	6.00	- 0.75	115
-	6.00	- 0.75	115
-	6.25	- 0.75	115
-	6.00	- 0.75	115
	S. E.	- 6.50	

PD: 60.0

TOPCON

MAXIVISION EYE HOSPITAL  
Somajiguda HYD.



NAME

04\_DEC\_2025 AM 11:15

NO. 4902

SN: 4774868

REF. DATA

VD: 12.00 CYL: (-)

<R> S C A  
- 5.00 - 3.50 40  
- 5.00 - 3.75 40  
- 5.00 - 3.50 40  
- 5.00 - 3.50 40  
S. E. - 6.75

<L> S C A  
- 6.00 - 0.75 115  
- 6.00 - 0.75 115  
- 6.25 - 0.75 115  
- 6.00 - 0.75 115  
S. E. - 6.50

PD: 60.0

TOPCON

MAXIVISION EYE HOSPITAL  
Somajiguda HYD.

10/10! Come for P.M.T

OD - 2.50 SPH - 6/6  
OS - 2.50 SPH - 6/6

6/6

PL

4/12/25

-5.00 / -1.50 x 153  
-6.50 / -

Followup

Net 16  
17

Un 6/120 P.H. 6/6  
10/1 6/120 P.H. 6/6

Keep 5.00 / 0.50 x 140° (6/6)  
6.50 / 0.50 x 110° (6/6)

No diplopia

(F) nml

ly.

Det  
11.40

Rempy ore

To continue for

Σ

# MAXIVISION

## Continuation Sheet

M.R.No. :

absent

explor

(PR)

ezR

2

404080

To see Dr. Dilil.

TOPCON CL-200

<R>      S                      C                      A  
         -5.00       -1.50       153

PSM 0.00 OUT    0.00 DWN

<L>      S                      C                      A  
         -6.50       +0.00       180

PSM 0.00 IN      0.00 DWN



**OCULUS - PENTACAM 4 Maps Refractive**

1.29r12

Last Name:	K	
First Name:	ALEKHYA	
ID:	SGD1936173	
Date of Birth:	10/21/2000	Eye:
Exam Date:	12/04/2025	Time:
Exam Info:		13:01:46

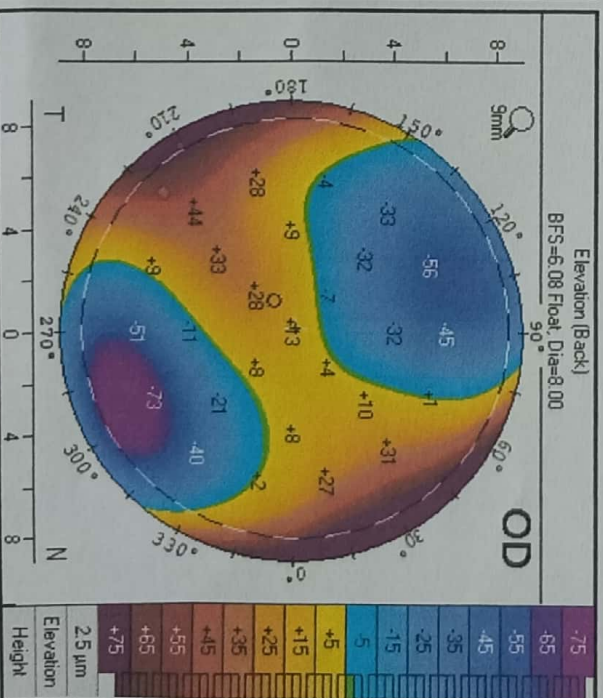
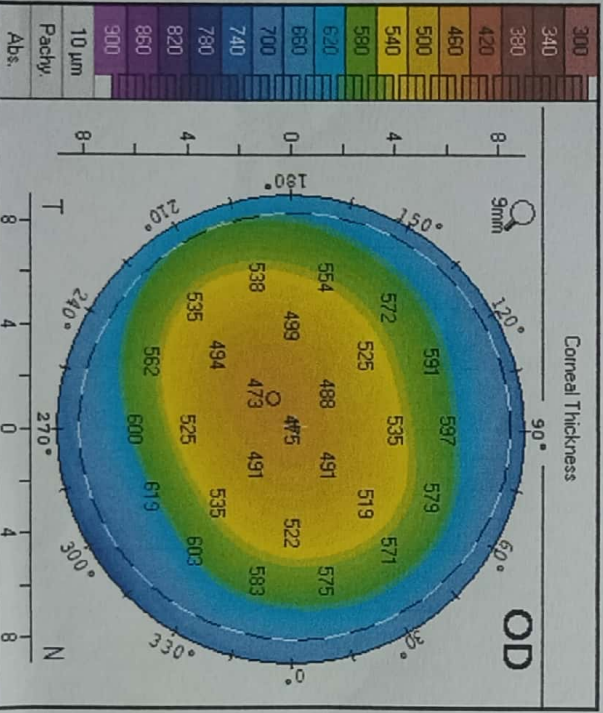
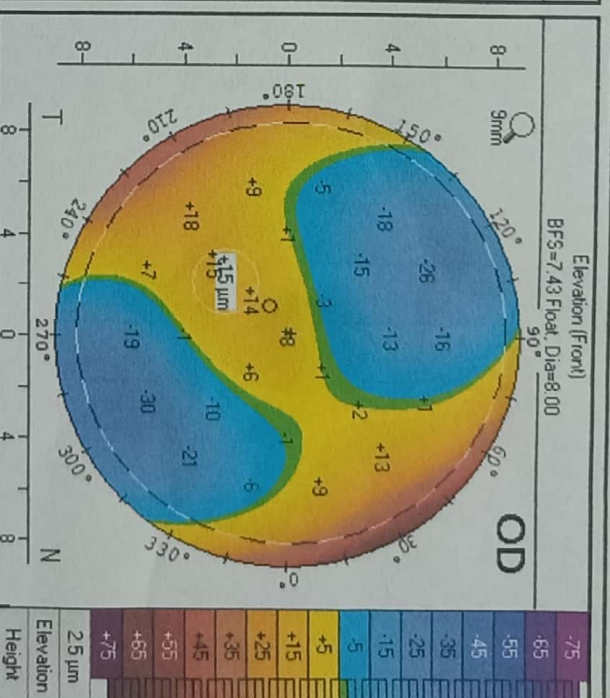
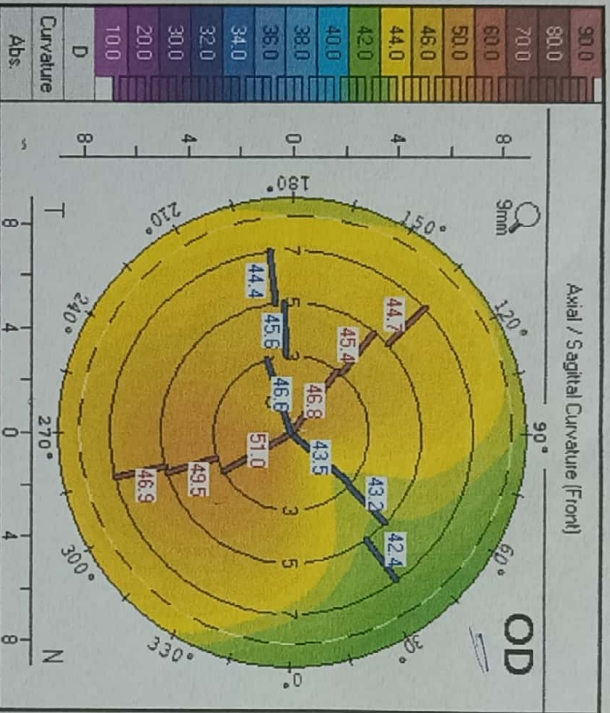
Fl:	7.48 mm	K1:	45.1 D	
Rs:	6.93 mm	K2:	48.7 D	
Rm:	7.20 mm	Km:	46.8 D	
Q5:	OK	Axis:	126.3°	
Q4val:	0.49	Aslign:	3.6 D	
(8mm)	Ripet:	7.69 mm	Rimn:	6.59 mm

Cornea Back	
Q: $\Delta$ val: (Dmm)	-0.48
Qs: OK	
Axis: (steep)	119.8°
R: R1	6.30 mm
R: R2	5.39 mm
R: R3	K2
R: R4	-7.4D
R: R5	
R: R6	
R: R7	
R: R8	
R: R9	
R: R10	
R: R11	
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R: R176	
R: R177	

	Packy:	x[mm]	y[mm]
Pupil Center:	+ 475 µm	-0.05	+0.07
Packy Vertex N.:	475 µm	0.00	0.00
Thinnest Locat.:	○ 471 µm	-0.61	-0.34
K Max. (Front):	51.2 D	+0.54	-1.08

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Cornea Volume:	57.6 mm <sup>3</sup>	H <sub>W</sub> TW:	
Chamber Volume:	233 mm <sup>3</sup>	Angle:	48.9°
A. C. Depth (Int.):	3.59 mm	Pupil Dia:	8.25 mm
Enter IOP   IOP(Sum):		Lens Th.:	3.66 mm

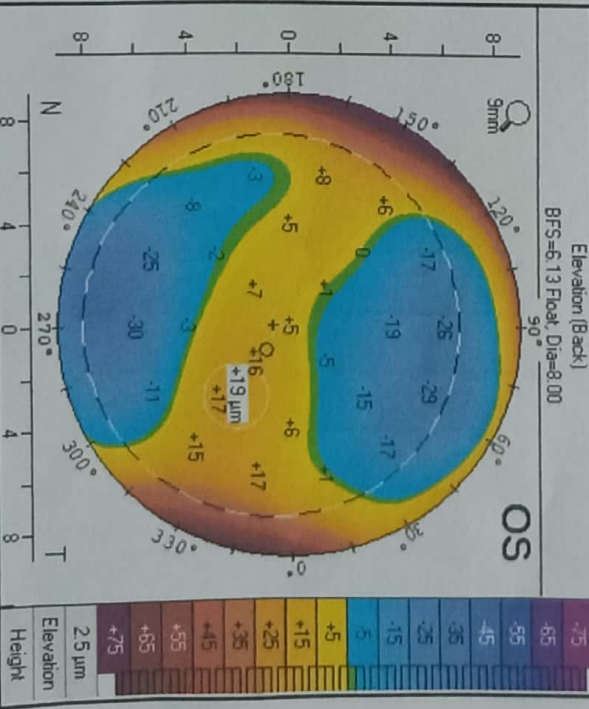
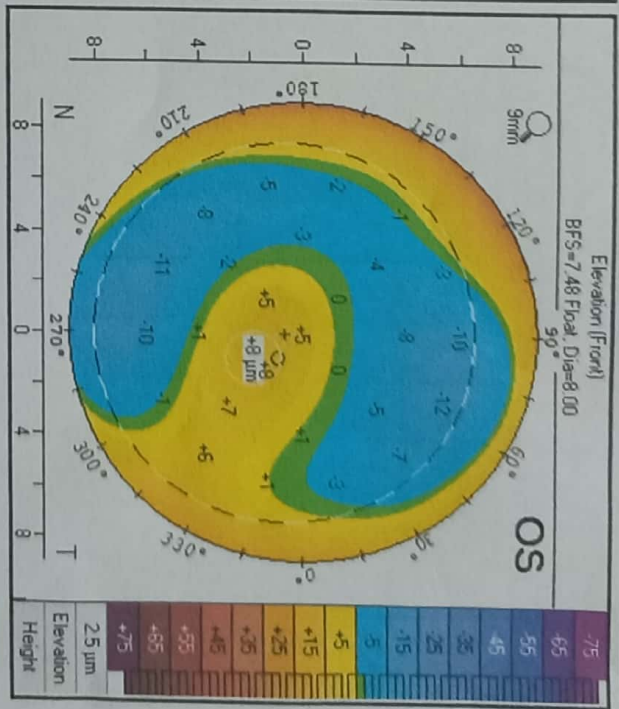
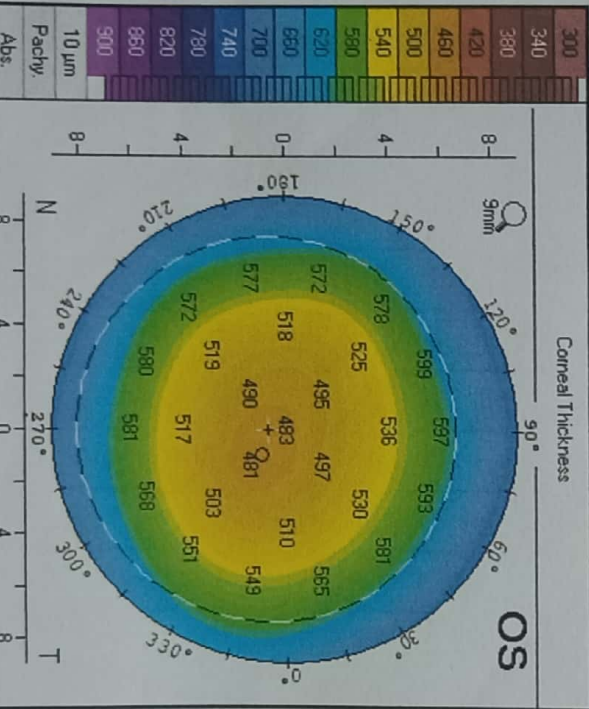
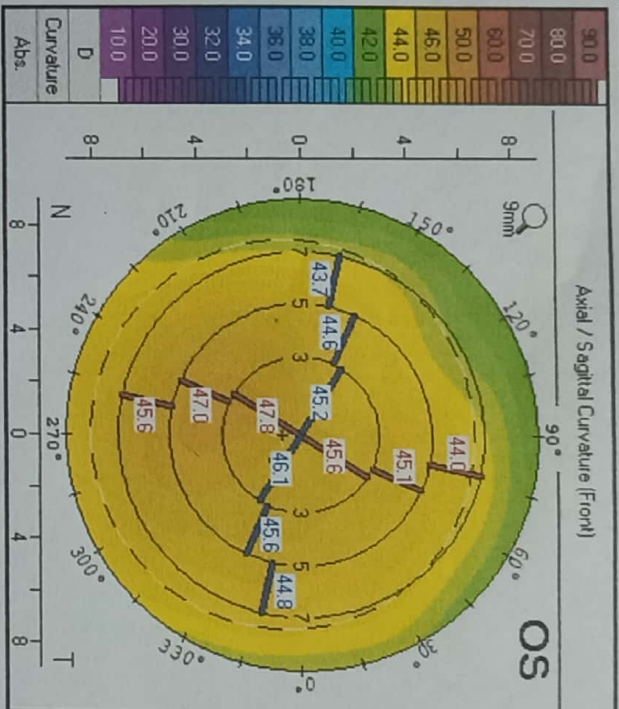
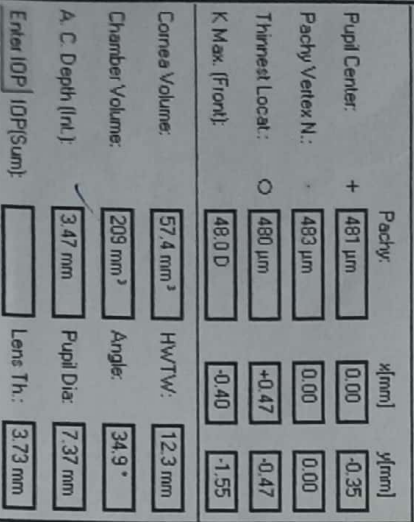
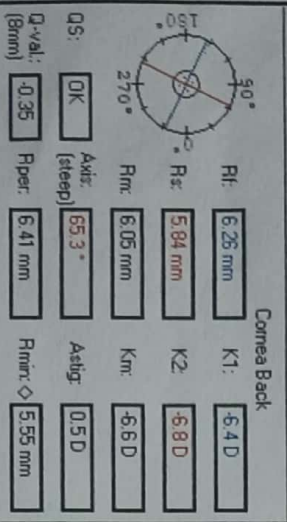
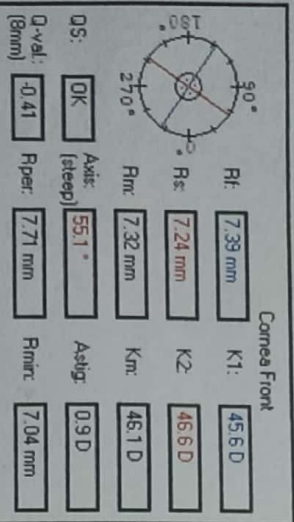




**OCULUS - PENTACAM 4 Maps Refractive**

1.29112

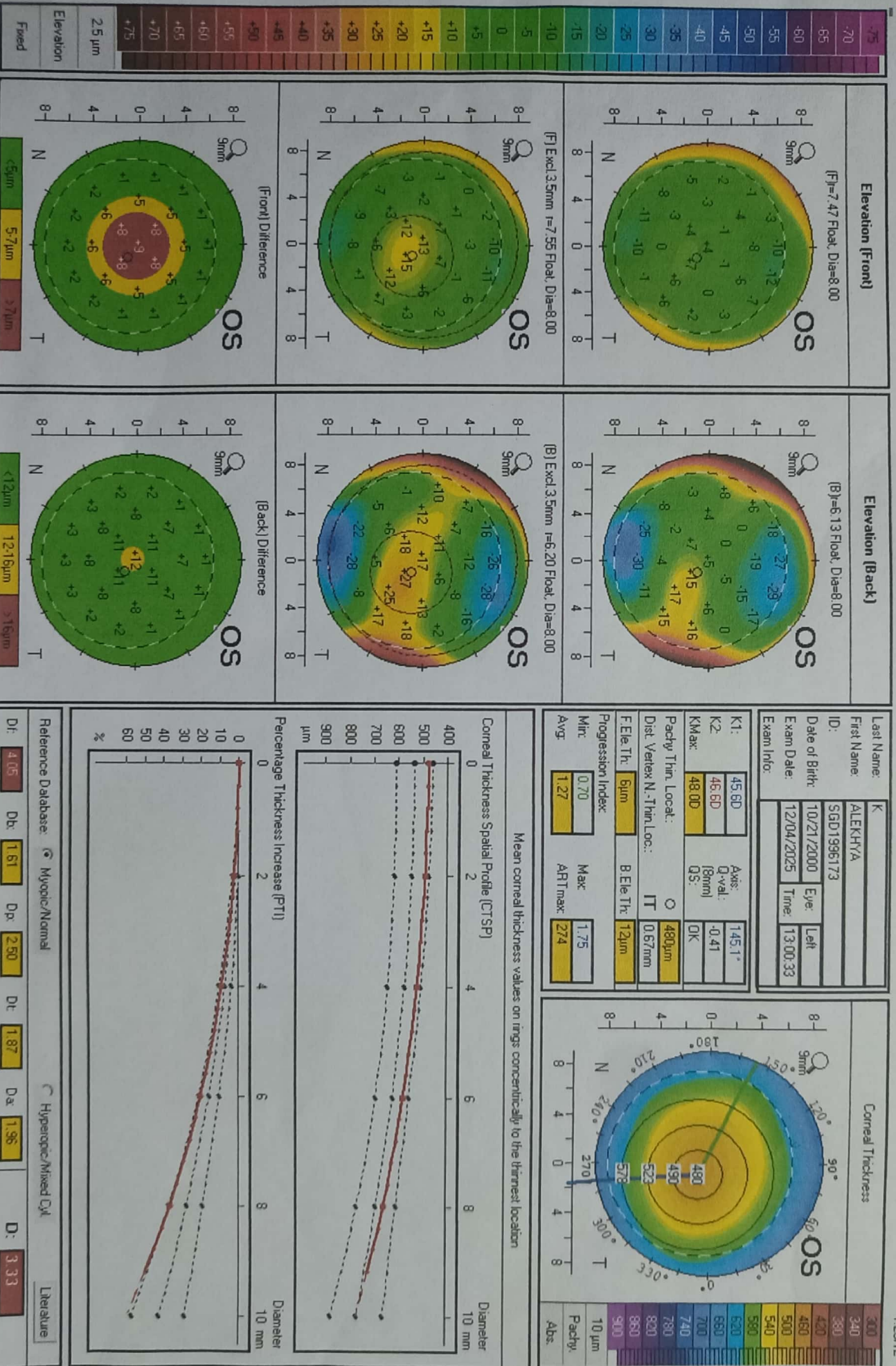
Last Name:	K
First Name:	ALEKHYA
ID:	SGD1996173
Date of Birth:	10/21/2000
Exam Date:	12/04/2025
Exam Info:	Time: 13:00:33





# OCULUS - PENTACAM Belin/Ambrósio Enhanced Ectasia Display

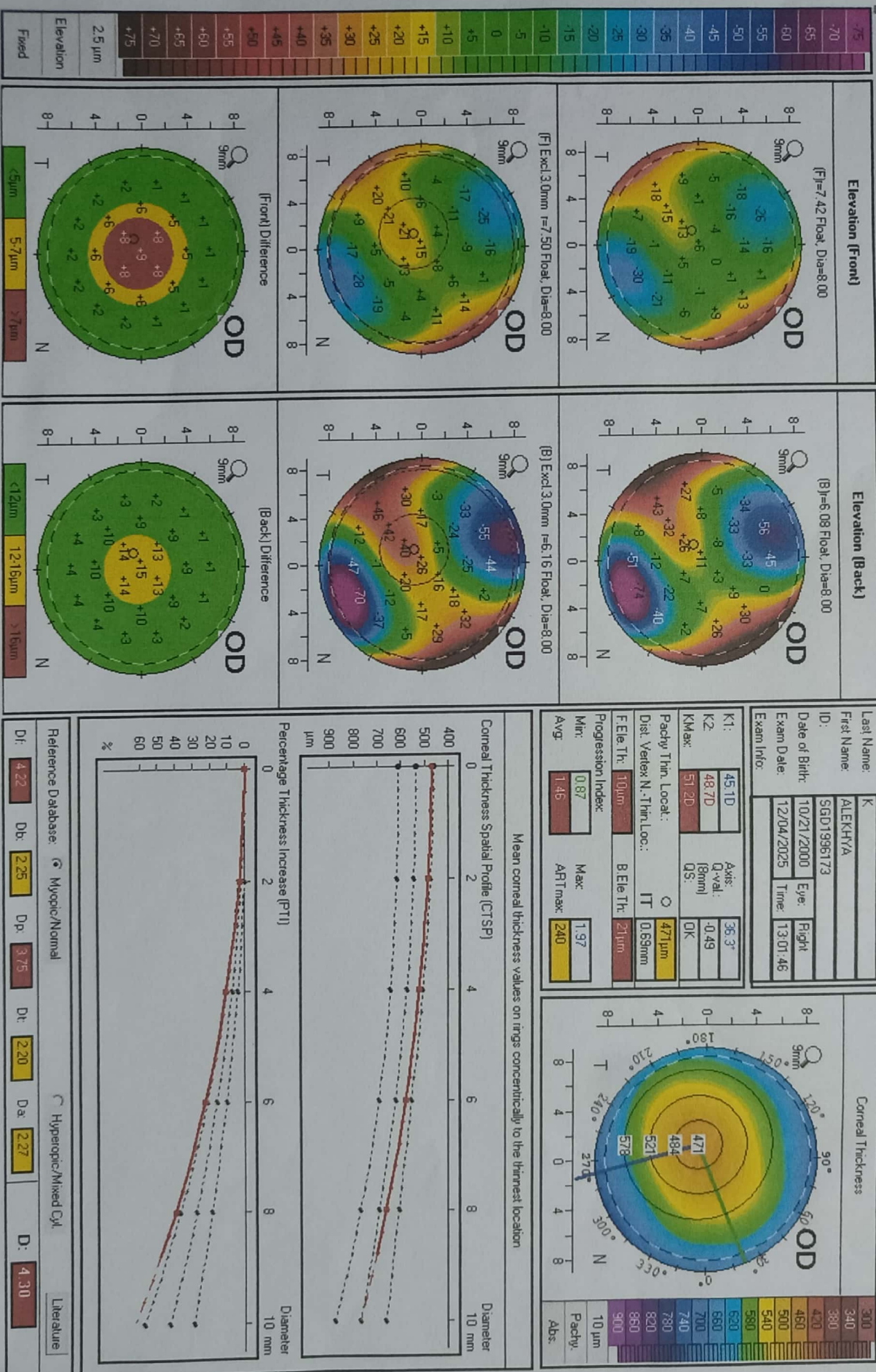
1.2912





# OCULUS - PENTACAM Belin/Ambrósio Enhanced Ectasia Display

1.2912





# TELANGANA GOVERNMENT EMPLOYEES HEALTH SCHEME

D.No. 8-2-293/82a/ahct, Road No: 46, Jubilee Hills, Hyderabad - 500033

## PATIENT REGISTRATION FORM

Patient No : 7048595

### PERSONAL DETAILS

Health Card  
No: GA0000552/03

Name: K ALEKHYA

Gender: Female



Age: 25Y 1M 14D

Relationship: Daughter

Slab: Semi Private Ward

Designation: Dependent

Contact No: 9866305901

### CARD ADDRESS

House No: 2-108/6/27/31

Street: P.N.R. COLONY

District: MEDCHAL

Mandal/Municipality: MEDIPALLI

City/Town/Village: BODUPPAL

Pin code: 500092

### COMMUNICATION ADDRESS

House No: 2-108/6/27/31

Street: P.N.R. COLONY

District: MEDCHAL

Mandal/Municipality: MEDIPALLI

City/Town/Village: BODUPPAL

Pin code: 500092

### REGISTERED HOSPITAL DETAILS

Registered Hospital: Maxivision Eye Hospitals Private Limited

Date and Time of Registration: 04/12/2025 11:09:37 AM