

PATIENT INFORMATION						
LAST NAME Ortiz	FIRST NAME Emilio	M.I.	SSN	DATE OF BIRTH 06/22/1992	SEX Male	MRN EMA4664276
STREET ADDRESS 554 Davis Lane			STREET ADDRESS CONTD.			
CITY Victoria	STATE TX	ZIP CODE 77905	HOME PHONE		CELL PHONE 3614331365	

GLASSES RX DETAILS						
	SPHERE	CYLINDER	AXIS	ADD	START	EXP. DATE
OD	-4.50	-0.25	055		09/27/24	09/27/25
OS	-4.00	-0.25	175		09/27/24	09/27/25

	Dist VA	Near VA	Dist PH	Underlying condition
OD	20/20			
OS	20/20			
OU				

ADDITIONAL INFORMATION						
Active	Yes					
Usage	Distance single vision					

Electronically Signed By: Valerie Baker, OD 09/27/2024 @ 10:05 AM
State Lic: 07280TG State: TX

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