RNAMES (Block Letters) K01E1	FIRST NAMES HELLENA	Sex F
IONE NUMBER	9555 239389	
DDRESS OR RESIDENTIAL	MALLAM	
CCUPATION STULENT	MARRIED DIVO	ARITAL STATUS RCED SINGLE OTHER
TE OF BIRTH AGE 0 1997 18 4R8	PLACE OF BIRTH ACCRA	ANY ALLEGIC REACTION TO MEDICINE
		TE OF FIRST ATTENDANCE
NEXT OF KIN	ADDRESS OR PHONE No. OF N	4



	INTERCEMENTE CHIMIC & LASER CENTIRE
	Ms. Hellena Kolei CARD NUMBER: 13472
	20/09/2016
	Difficulty seeing at night, Itching and
.*	Tearing in 138 on occasion.
	Allung Scd
	2.6/5 mg
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	papithae commen papithae
	/ When
	/ Arriv
(h)	James
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	mach finds
	mauler mann
	J PEWYIWIN HINGI WILL O'C
	plan: Ut- paraval BE PED
	see/2 or-Rowing



## INTER-STAR EYE CLINIC & LASER CENTER

Loc: 10th Lane H/No. F764/1 Osu, RE Accra, Old American Embassy Road, Opposite Buka Restaurant Near Citizen Kofi. E-mail: Interstareyeclinic@gmail.com Tel: 0302-783832 / 027-7755354

NAME:	-	•	· .	•			TEL H	oบ	SE	wor	к		
ADDRESS:								•	DATE	OF BIRTH_			
DATE OF TEST			R PRESCRIPTION GIVEN										
20-9-16.		S	ph	_	yi	Axis	Pris	m	Sph	Cyi	Axis	Prism	
20.	Dist	PU	evo.	-0	·SU	90			Plano	-0.25	70		
P.D. ✓I	Inter												
63mm.	Read												
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DISPENSING NO	ΓES						ESCR	IP.	TION		GH¢	P	
		FRAME DESCRIPTION								Gile F			
			LENSES										
			COATING										
•			SUN	DRI	ES		-						
•		-						T	DTAL		•		
			•			•		V	OUCHER				
								В	ALANCE			•	
PLEASE TICK			<u>.</u>			•		DI	EPOSIT				
CASH	CHE	QUE			CRI	EDIT CARI	<b>&gt;</b> □	В	ALANCE				
DISPENSED BY	Cl	ECK	ED BY			RECEIVED	BY		DATE				

	<del></del>
SYMPTOMS & HISTORY	OCCUPATION HUBBIES
EXTERNAL EXAMINATION OPTHALMOSCOPY	FIELD TONOMETRY COLOUR ETC.
	FIELD TOROMETRY COLOGNETO.
OPHTHALMOSCOPY SUBJECTIVE	ACCOMMODATION
6/8 LA 6/R Planol-0.33 6/5-2 6/L Planol-0.25 Binoc ADD	$0 \times 90_{=6/5}^{R} R$ $Rdg ADD) 6/5$ $= N$
MUSCLE BALANCE	RETEST DATE
Auto R to 251-0.50×101	ALIEU DAVE
L -0-50/-0.25 X72	2