

URNAMES (Block Letters)

XILSON

FIRST NAMES

MABEL

Sex

F

PHONE NUMBER.....

0243114355

ADDRESS OR RESIDENTIAL.....

ACCRRA

OCCUPATION

Prison Officer

MARITAL STATUS

MARRIED	DIVORCED	SINGLE	OTHER
<input checked="" type="checkbox"/>		<input type="checkbox"/>	

DATE OF BIRTH

5TH SEPT '65

AGE

53

PLACE OF BIRTH

FBI

ANY ALLEGIC REACTION
TO MEDICINE

NATIONALITY

GHANAIAN

RELIGION

CHRISTIAN

DATE OF FIRST ATTENDANCE

23-10-17

NEXT OF KIN

ADDRESS OR PHONE NO. OF NEXT OF KIN

UCO - Grid 1500 - w (30/6/17)
1CO - Grid 1,800 (18/10/18) Confirmed by George
MLO - Grid 2550 - ~
19/11/18



INTER-STAR EYE CLINIC & LASER CENTRE

NAME: Khalid Maseel

CARD NUMBER: 18570

DATE: 23-10-17

% Blind Vision in R.E for 3/2

Dm. Hys

HPT = P

Inflame.

(can see)

Best Hys = 18.0

15.0

V_R 6/18 - 2nd, right

V_L 6/18 - 2nd, left.

TOP
18 18

Bal eyes Hys 18

Cath. Caud - lens = Cath. Caud
Cath. Ret

- Inf. periorbital - furuncle - S-T mobile
- macular head exudate

Cath. Ret
Vitreous periorbital

+ lipages

Plan

① R.S. PRP

② G. Ant.



INTER-STAR EYE CLINIC & LASER CENTRE

NAME:

CARD NUMBER:

DATE: 30-11-17

Hi for review. Twitching of RE was for 2/7

$V_1 = 6/18$ un

$V_2 = 6/24$ un

B1 Gush Larter

JW
B13

Plan

- ① CT (R/L PMP + Ama)
- ② frenulum ^{BD} _{AO}
- ③ R Tear ^{AO} _{ref = AG}

JW 4/5
VA + DBE

30/11/17 RE - flat VDLA

Thru	Power	# of spots	Spot Size
0.2	25V	928	500

Low And

Thru	Power	# of spots	Spot Size
0.1	15V	481	100

Plan

① ~~Terodex~~
Ed
② ~~Terodex~~
Ed
③ ~~Terodex~~
Ed

Su 4/5
Sup PNP
② Sup

21/12/17 RS Sup PNP

Time	Power	# of Spots	Spot
02	260	1281	500

Plan

① CT

Su 4/5
Re-Written

18-1-18 q.c. Review

on Glaring, night

n 6/30pm, 6/12pm.

seen

$$FBS = 9.0 \text{ mmHg}$$

0%
-

mild ptosis

quiet

clear cornea

deep a/c

W/n pain

distal w/
↓

A₁₀



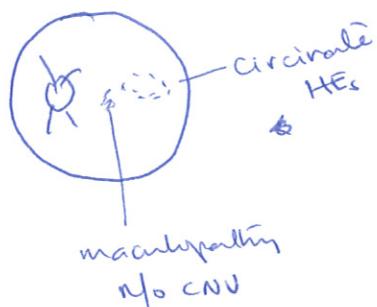
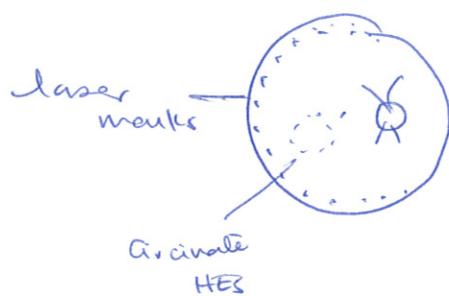
INTER-STAR EYE CLINIC & LASER CENTRE

NAME: NILSON MARCEL

CARD NUMBER:

DATE: 18/01/18

dilated SLE to follow up



mp: Bil osmo

pla... OCT - macular

20/6/18

OCT (Rk) Temp med (283)
extreme 284

+1 sub-A/c - fund

Stop

↳

16 12

① Total fundus
plus

② R Temp med

In yr
photograph

3-2-18

% Review

VR 6/18, 6/12 pH v 6/20, 6/18,

5M grade

FID

14/16

plan
① P Tens
2d B

su sp
 $\sqrt{A+D}$

22-23-18 su: for review. No complaint Figs. 9-C
OTTO

VR: 6/12 gr

v_L: 6/18 gr

JMP

14/14

- And + PRP
Sear

futur meander Hard exudates
PRP + Evid Sear

plan
① Systemic + ed
B

su 2/2
 $\sqrt{A+Q}$ (meander)



INTER-STAR EYE CLINIC & LASER CENTRE

NAME:

CARD NUMBER:

DATE: 07-04-12

FBS: 11.0

E: Blurry vision in BE for 2/52

V_R: 6/12 - g

V_L: 6/18 - g

H1 Lenses RS

L1
L4/6

Plan
① Patches Regs
red

See Yn
VA + O.D
(normal)

② Tobradex Red
RS

29-5-18 c/c Photophobia in BE for 1/52
Drops last fbs 18.0, blurred V18m in RE
finished VR 6/18 - g, VL 6/18 - g

H1
L4

Bal grnt
Anterior - lens - Anterior
catgant
Intraocular fluid - fund - Bal 8cm
Intraocular fluid - fund - Bal 8cm

for Yr
Oct
(males)

Plan
O R file ref
BS

26-6-18 dc review last fbs 829

VP 6/36ur, 6/24gl n blushing, blushing

Oct; Re Dry
mucilous (239)
241

JM

Catarrh
cerebral

- lens

Catarrh
cerebral

#3 12 - PM Sore
- meatus hard
excretion

fetus

PMS + Cerv
Sore

- meatus hard
excretion

for Yr

Plan
O R file ref



INTER-STAR EYE CLINIC & LASER CENTRE

NAME:

CARD NUMBER:

DATE: 31-07-2017

%: Blurred vision in both eyes and images appear darker in colour, Last FBS (7.1), Redness tears is finish Hching for about 4 days now

VR
6/₆₀⁻²_{ua} 6/₆₀_{gl}

Vh
6/₃₆_{ua} 6/₃₆_{gl}

B11 gentle

plan

① R Tens

Sm 6/₅₂
VA 10/10 BE

14 (8)

10/10

6-9-18

%: Blurry vision still persist.

Last FBS (today): 8.3 mmol/L. Tanning +, Pain + (BE)

VR

6136gr

Vh

6136gr

NET

16 16
(14) (14)

Cystine + pse - lens Anterior pse extended
Cysteine - fundus - fundus arterioles
- sup. arcuate - fundus + VET
- median lobe - median lobe
exudation exudation

DD (R/L vs
median ectasia

Plan

① Rx phases + DR
② OOT (medial)

③ R-L Tears wet -
④ R/L PNP B

Su 6/2



INTER-STAR EYE CLINIC & LASER CENTRE

NAME:.....

CARD NUMBER:.....

DATE:..... 18-10-15

%: Feels vision is gradually deteriorating (R.E). Itching + Pain +, tearing + (when chewing). Still on medication
FBS (5 days ago): 9.1 mmol/L

VR

6/60⁻²_{mg}, M_{ph}

(R)

VL

6/24⁻²_{mg}, 6/18⁻²_{ph}

AT 18
16

Pupil sluggish
reaction

R/R/R

Dilate BE

Phosis +

Lens

NSII/CC/PSC

HCl
20 19
(18). (17)

disc n

Fundus

haeg +
New vessels n

Hard exudate
at macula +

haeg +

- Inf L Sip Net
- Inf pre-retinal
leaks

Adv

① R/L Pup

② R/L Press + M

③ System tabs

su 4/5

18/6/18

R/L Inf, PRP

Time	Power	# of Spots	Spot size
R. 0.7	280	1194	500
L. 0.2	320	1167	500

Plan

① Tobratey

② By Sbrane

150
100
75

③ R/L phaco + DL

SU 2/52

R/L SUP PRP

11/6/18

R/L - SUP PRP

Time	Power	# of Spots	Spot size
R. 0.2	320	821	400
L. 0.2	320	1334	400

Plan

① CT

② R/L Phaco + DL

SU 4/52



INTER-STAR EYE CLINIC & LASER CENTRE

NAME:.....

CARD NUMBER:.....

DATE: 19/11/18

Alcon SA60AT

Biometry (R.E)

IC1 - 43.7

IC2 - 44.3

AL - 22.47

IDL(p) 23.50

(-0.15)

24.00

(-0.51)

24.50

(-0.87)

(L.E)

IC1 - 43.7

IC2 - 44.3

AL - 22.46

IDL(p) 23.50

(-0.12)

24.00

(-0.48)

24.50

(-0.85)

23-11-18

re: phaco + IOL
YSA

MODEL: SA60AT 23/11/18 EXP DATE 2023-02-28
 POWER: 23.5 D RE UV
 LENGTH(D_T): 13.0mm
 OPTIC(D_B): 6.0mm
 SN 21213790 060 ACRS[®] SINGLE PIECE IOL
 Alcon Laboratories, Inc.

24-11-18

VR CF(4n)

Ph. 6/36

(R) Cornea - ST herte

Air bubble
After
Pupil

(1) ples
 Vigox qd ps
 (2) Adde qd ps

③ Pred fast
2Wkrs RS

Su 5/
DBS
 $\sqrt{A} + DBS$

29-11-18

%: Review. Still on drops

$\sqrt{L} = 6136_{\text{m}}, 6112_{\text{pm}}$

$\sqrt{L} = 6136_{\text{m}}, 6124_{\text{pm}}$

NCI
18 18
(16) (16)

PCDR
measured
large + hard
exudates

— been → central contact
— fingers → Int. Vit large
PRP Sust

④ Plan
Pred fast
Gx RS

⑤ CT

Su 2/
CT
(measured)



INTER-STAR EYE CLINIC & LASER CENTRE

NAME:

CARD NUMBER:

DATE: 15 - 12 - 18

VR - 6/36GL Ph 6/12 w

VL - 6/12 ph)

By Grade

pcpl - lens - left eye Corneal

HCl

19 18

- Pre-retinal
fibrin
(Scattered)

- PMI Scars

① ~~PMI~~
G DCT
(measured)

OG fundus macular
retinae
normal macula

② D = Super PMI

15-12-28

RE

Sym PMS

Thin	Power	# of Spots	Spot Size
0.2	280	1913	400

Plan

① Tobacco and
R S

② R Seeds and
R S

Su 4/2

4/01/19 2 Blurred Nodules in RE for 5%
VL 6/60_{ug}, 6/18_{pm} VL: 6/60_{ug}, 6/18_{pm}

③ Ghe - clear

AC - +1 cm

FQ

14/13

pcps

Plan

④ CT 15

⑤ Tobacco and
R S

Su 4/2
VA + DBS
(retractor)



INTER-STAR EYE CLINIC & LASER CENTRE

NAME: CARD NUMBER:

CARD NUMBER:

DATE: 11-1-19

(Yesterday)

%: Felt severe itching in the right eye and rubbed it.
 Suddenly the eye (R-E) was covered by a dark substance
 and cannot see anything since yesterday. FBS -

V_RCF @ 1m_{uu}, MI_{ph}V_L6/60_{uu}, 6/18_{ph}⁻²Seen

pt swollen lids ++
 discharge?

Right intact
 clean cornea

deep AC

n/a pupil

AC in motion

NCT
 (5 16)

dilate w! pre-measure - fingers -
 R Vit. large

for DBE (D) for (PRP)
 (Grafs)

① play
 ② R.S. - Super
 W.R.P.

12-01-19

RE - Supra Sup

Thin	Power	# of spots	Spec size
02	280	1469	400

Plan

○ Tobradex
and RE

① R Tears and BE

Surf 18
B2

30/07/19

C/C: for Review

Uni CF @ 2m

pH: CR < 6/60

6/86

PT: 6/18

Dilate BE

HCl
14. 15

PCISL

NS II / PSC

disc ⊙

Fundus

disc ⊙

Peripheral

vitreous hazy

Premacula hazy +

INTER-STAR EYE CLINIC & LASER CENTRE

NAME: MABEL Wilson

CARD NUMBER: 18570

DATE: 30-1-19

Adv
BE - Refresh tears off
4 times/day

LE - Phaco + IOL

Review in 1 w/e

09/02/19

(C) Can't see well with the R.E, Fanning,
pain x 2 days, still using Refresh tears.

Vn: CF@2.5m

PTT: < 6/60

6/60

NSC
15/16

(R)

Gay - hyperemia

PTT: 6/18-
(Takes longer time)

Coke - dry

AC - raw cells

pcr

Plan
② Tobratexol RE

8u 2/2
Su 2/2 on Tobra 10% Alexan 1d of

01.03.19

Σ for review. drops finished 4/7
FBG today - 9.0

V_R: CF@4mmue NI_{Pt}

V_L: 6/60mm 6/24_{Pt}

N/A
↑
14/15

RE

LE

lid edema

PCIOL

Deltate BE Pigments on
IOL

- pre-measured Vit fundus - meander band
large excretots
- PMP scars

② plan
R.E. Anastomoly

① R. Tarsal wedge
B

for 4/2

01/03/19

① Anastomoly (0.05ml)

See 3/5/2
DT APR/11

plan
① Nigamox acid RE (W/7)

② CT be

INTER-STAR EYE CLINIC & LASER CENTRE

NAME: CARD NUMBER:

DATE: 16/10/2019

Q/S. Fly Review, had injection last two weeks, pain, swollen lids, itchy & R/B & S/Z.
FSS: 8.0mm/k

Vhi L 6/60th wing

PA: L 9/60

6/60th

PA: 6/12th



Sym
of

swollen lid +
infectioⁿ
dischargeⁿ
tearⁿ

PC in situ

1. tab Ciprofloxacin 500mg bd x 5/7
2. tab paracetamol 500mg tds x 1/2
3. full Patanol 12mls
4. full Afrin drops 6mls | 5/7
5. See 1/2

D.L

28/08/19

Q: For Review, To See Dr Adam
Blurred Vision w/ 25

Th: CFO Intra

pt: N.H.

CFO Ingr

NCT



- Pupil lens - Anterior + Posterior
- Vit wgn fundus - macula hard exudate

< 600

PT: 6124

617687

Plan

ULS, Phaco + IOL

② R-gel tube

for YB

26/4/19

LE - Phaco + IOL ↓ LA
D/B ~~Dr. Smith~~ Dr Adam
A/B Godwin

FBS - 7.0 mmol

MODEL: SA60AT 26/4/19 EXP DATE:
POWER: 22.0 D 2023-04-30
LENGTH(\varnothing_T): 13.0mm
OPTIC(\varnothing_B): 6.0mm
SN: 21217495 052 ACRSoft SINGLE PIECE IOL
UV Alcon Laboratories, Inc.

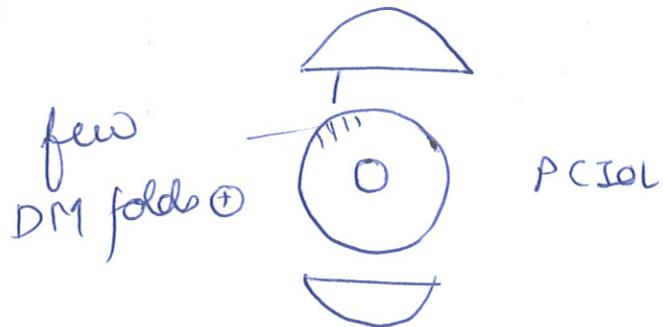


INTER-STAR EYE CLINIC & LASER CENTRE

NAME: Wilson Mabell
DATE: 27/4/19

CARD NUMBER: 18570

27/4/19 1st day Post op NL: 6/18 - 6/18 pm



Adv

~~LE~~ - LE - Pred forte o/d
every 2 hr

LE - Nevanac o/d
4 times/day

LE - Vigamox o/d
4 times/day

Review in 1 week

6/3/05/19
Q: For Review, pred forte has finished.

Un: 6/36 u/a
PA: 6/18

6/9 u/a
PA: 6/16

seen

212

Quint
pseudosphenodus

sight hyper

SCT

No mil
PC in

NCT

A
4 (13) 14 (13)

PL-1. first pedicels 4 July

2 first vegans x 6 July

3. first Newanace 6 July

4 See 2/52

LE

18/05/19

TD

q: for Review, pairs in the LE x 3/2

4n; 6/68 ua

6/959

PA: 6/24-

PA: 6/6

NCT

17 16

B11 Quinte

PCDR — lens — PCDR

① T. laterale
pl. ad. w
② T. heterale
ad. b

See 3/52



INTER-STAR EYE CLINIC & LASER CENTRE

CONSENT FORM FOR ADULT/CHILDREN

NAME: Mabel Wilson

SEX: Female

D. O. B:

ID No: 18570

OPERATION CONSENT BY PATIENT/RELATIVE

I, Mabel Wilson on

On behalf of myself

Hereby consent to undergo the operation of Phaco HAC L.R

The effect and nature of which has been explained to me

I also consent to such further or alternative measures as may be found to be necessary during the course of such operation and the administration of local or other anaesthetic for the purpose of same

I understand an assurance has not been given that the operation will be performed by a particular surgeon

Mabel Wilson

Signature of Patient/Relative.....

Date: 26/4/19

I, DR T. S ADAM have been this consent before surgery and explained the nature of the operation to patient/relative

Signature of Doctor:

Date: 26/4/19

Physician1:
ID:18570 Name:WILSON MABEL

BIO	B	PACHY
-----	---	-------

04/26/2019 08:51

Axial	ACD	R1 (mm)	R2 (mm)	Target
23.00	3.73	7.78	7.62	0.00

Formula
Formula/T

IOL1	PMMA-AU	IOL2	SA60AT	IOL3	ACRYLIC
Aconst	118.5	Aconst	118.4	Aconst	118.0

Power : 21.89 Power : 21.76 Power : 21.26

IOL	Ref.	IOL	Ref.	IOL	Ref.
20.5	0.96	20.5	0.88	20.0	0.89
21.0	0.62	21.0	0.53	20.5	0.54
21.5	0.27	21.5	0.18	21.0	0.19
22.0	-0.08	22.0	-0.17	21.5	-0.17
22.5	-0.43	22.5	-0.52	22.0	-0.53
23.0	-0.79	23.0	-0.88	22.5	-0.90
23.5	-1.15	23.5	-1.25	23.0	-1.27

Selected IOL No. _____
Model: _____
IOL : _____

OD/R IOL BIO / IOL

USB Print

Physician1:
ID:18570 Name:WILSON MABEL

BIO	B	PACHY
-----	---	-------

04/26/2019 08:51

Axial	ACD	R1 (mm)	R2 (mm)	Target
23.04	3.83	7.71	7.67	0.00

Formula
Formula/T

IOL1	PMMA-AU	IOL2	SA60AT	IOL3	ACRYLIC
Aconst	118.5	Aconst	118.4	Aconst	118.0

Power : 21.70 Power : 21.58 Power : 21.08

IOL	Ref.	IOL	Ref.	IOL	Ref.
20.0	1.17	20.0	1.09	19.5	1.11
20.5	0.83	20.5	0.75	20.0	0.77
21.0	0.49	21.0	0.40	20.5	0.41
21.5	0.14	21.5	0.05	21.0	0.06
22.0	-0.21	22.0	-0.30	21.5	-0.30
22.5	-0.56	22.5	-0.66	22.0	-0.66
23.0	-0.92	23.0	-1.02	22.5	-1.03

Selected IOL No. _____
Model: _____
IOL : _____

OS/L IOL BIO / IOL

USB Print



INTER-STAR EYE CLINIC & LASER CENTRE

Date: 6th April, 2019.

MEDICAL REPORT

RE: WILSON MABEL DOB: 25/09/1965

The above named patient reported to our clinic on 23rd March, 2019 with complaint of blurred vision in the left eye.

On examination, VR: C/F@3m unaided not improving with pinhole and VL: 6/60 unaided improving to 6/24 with pinhole.

IMPRESSION:

- Left eye cataract

RECOMMENDATION: Left eye Cataract Surgery (phaco emulsification + PC IOL) at a cost of Five Thousand and Five Hundred Ghana Cedis (GH¢5,500.00).

 08/04/19

DR. WINSTON CEESAY;MD, FWACS.
CONSULTANT OPHTHALMOLOGIST

INTER - STAR EYE
INTER - STAR EYE CENTRE
CLINIC AND LASER CENTRE
10TH LANE, HSE. NO. 764 OSU - RE, EMBASSY,
OPPOSITE BUKA NEAR OLD AMERICAN EMBASSY.
TEL. 0277755354, 0244850200

Date: 6th April, 2019.

MEDICAL REPORT

RE: WILSON MABEL DOB: 25/09/1965

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.....
DR. WINSTON CEESAY;MD, FWACS.
CONSULTANT OPHTHALMOLOGIST



INTER-STAR EYE CLINIC & LASER CENTRE

CONSENT FORM FOR ADULT/CHILDREN

NAME:	Mabel Wilson
SEX:	Female
D. O. B:	25th Sept. 1985
ID No:	18570

OPERATION CONSENT BY PATIENT/RELATIVE

I, Mabel Wilson
On behalf of self

Hereby consent to undergo the operation of Avastin Injection RE

The effect and nature of which has been explained to me

I also consent to such further or alternative measures as may be found to be necessary during the course of such operation and the administration of local or other anaesthetic for the purpose of same

I understand an assurance has not been given that the operation will be performed by a particular surgeon

M. Wilson

Signature of Patient/Relative

Date: 01/03/2019

I, Dr AARTI HEDA have been this consent before surgery and explained the nature of the operation to patient/relative

Signature of Doctor:

Date: 01/03/2019

INTER- STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

Patient: WILSON, MABEL
Physician: ADAM, Y S DR.
Operator: E., LOVERENCE
Disease: Cataract

OSU ACCRA . 233277755354

Gender: F
ID: 18570

OD

Exam Date: 15/12/2018
DOB(age): 25/09/1965 (53)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27

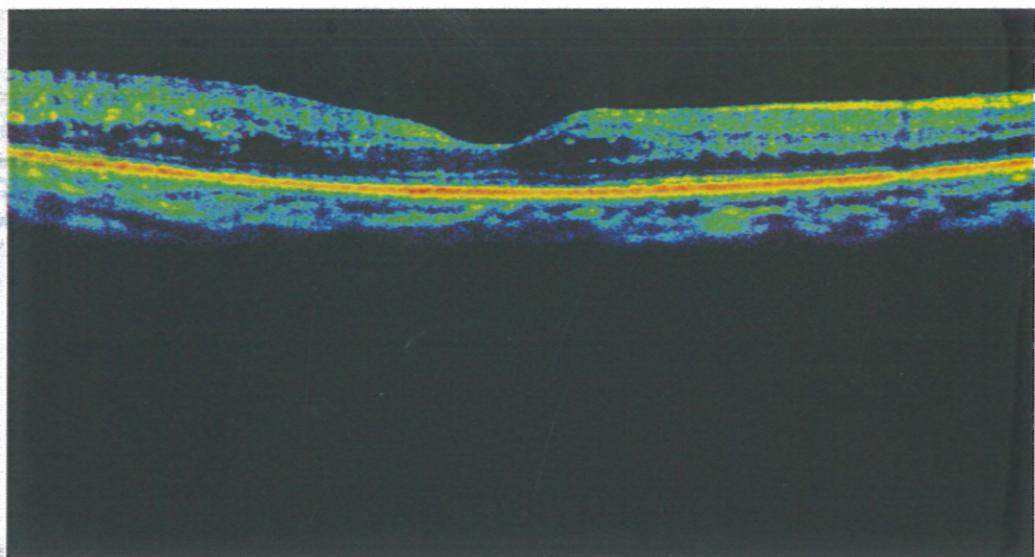
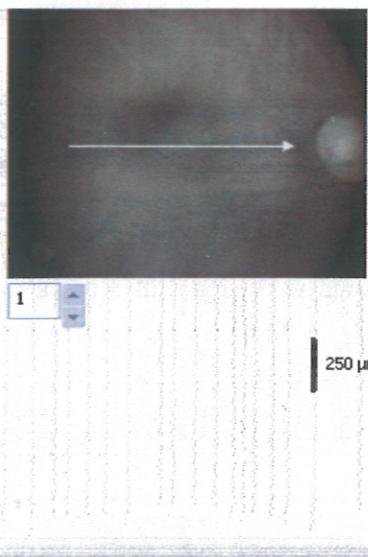
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OD 15/12/2018 10:00:48

Line SSI= 38.2

6.00 Scan Size (mm)

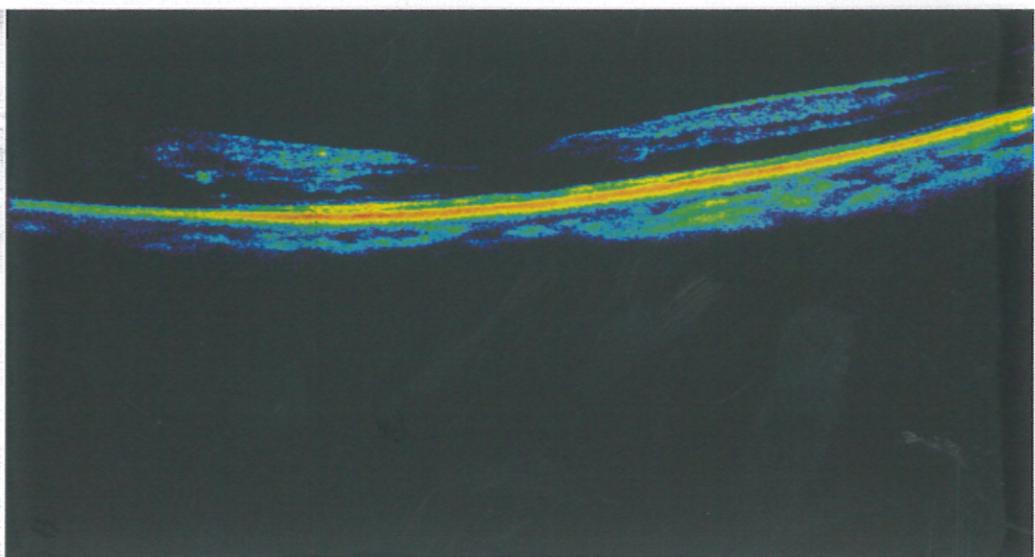
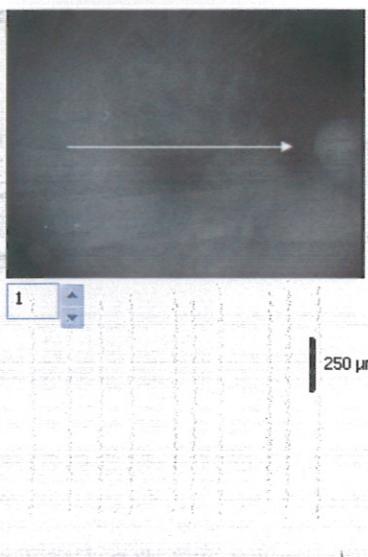
6.00 Scan Size (mm)



OD 06/09/2018 16:53:18

6.00 Scan Size (mm)

6.00 Scan Size (mm)



Software Report Date: Saturday December 15 10:10:09 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

ing the OCT Revolution

Defining the OCT Revolution

optovue

INTER- STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

OS

Patient: WILSON, MABEL
Physician: ADAM, Y S DR.
Operator: E., LOVERENCE
Disease:

Date: 15/12/2018
DOB: 25/09/1965 (53)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27

Gender: F
ID: 18570

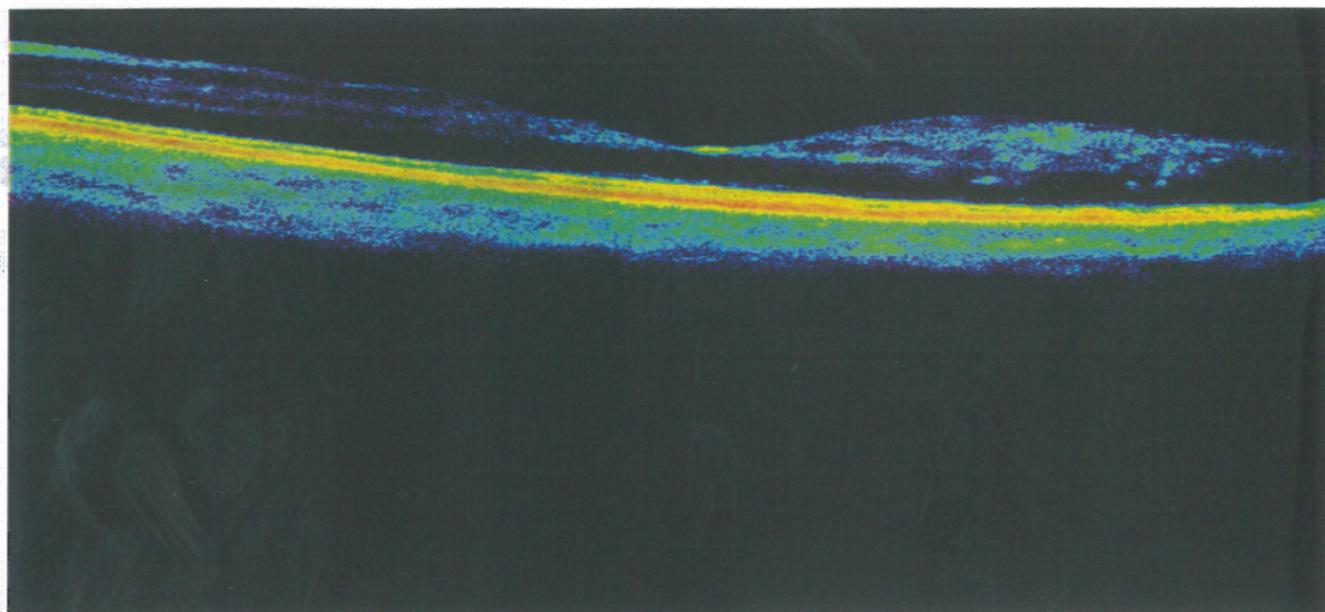
Exam Date: 15/12/2018
DOB (age): 25/09/1965 (53)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27

SSI= 35.05

6.00mm Scan Line

SSI= 36.7

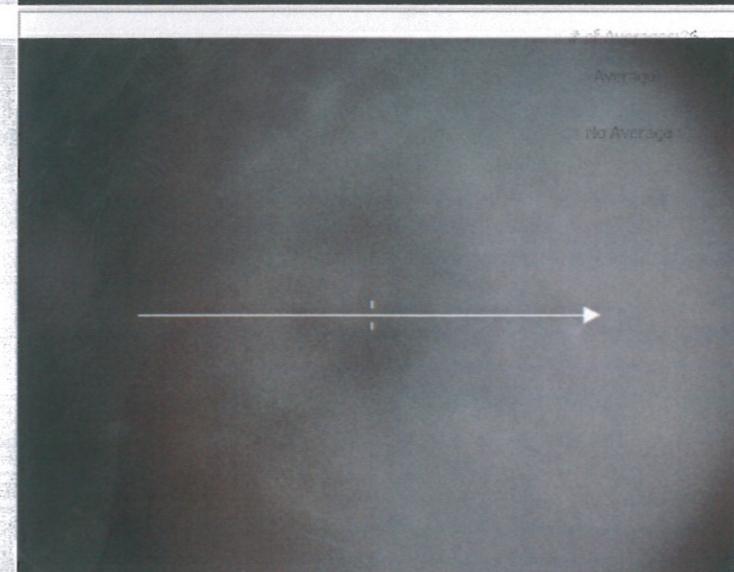
6.00mm Scan Length



of Averages: 26

Average

No Average



Diagnosis:

Report Date: Saturday December 15 10:10:33 2018

Report Date: Saturday December 15 10:10:38 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER-STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

Macula Map(EMM5) Retina Report

OD/OS

Patient: WILSON, MABEL
Physician: ADAM, Y S DR.
Operator: E., LOVERENCE
Disease:

Date Exam: 15/12/2018
DOB: 25/09/1965 (53)
Gender: African Descendant
Algorithm Version: A6, 8, 0, 27

Gender: F
ID: 18570

Exam Date: 15/12/2018
DOB(age): 25/09/1965 (53)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27

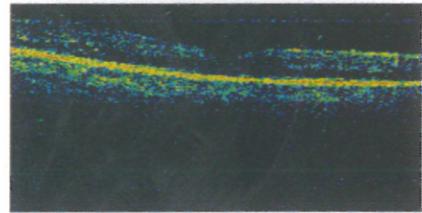
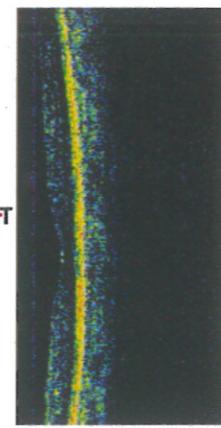
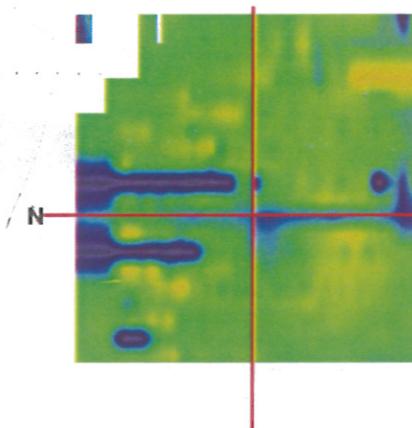
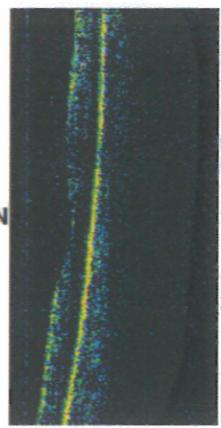
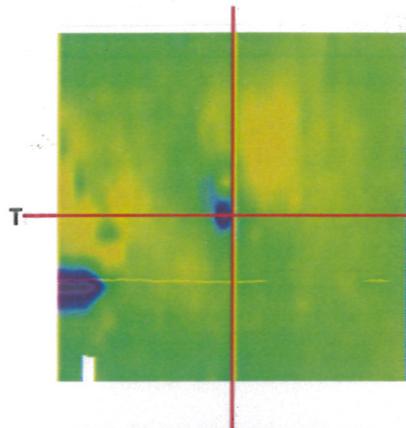
Retina Thickness Map

OD

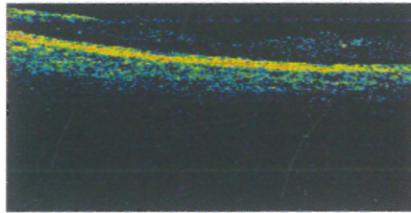
Full Retina Thickness Map

OS

Threshold 0



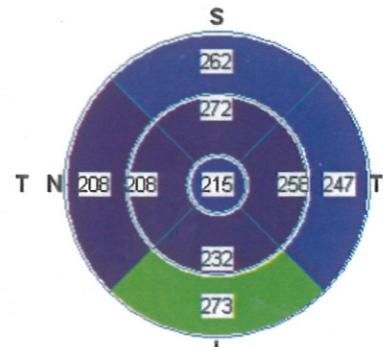
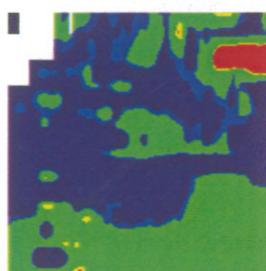
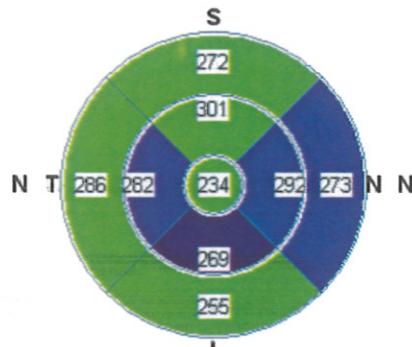
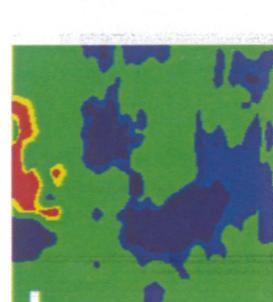
—750
—600
—450
—300
—150
0 μm



—750
—600
—450
—300
—150
0 μm

Exam Date: 15/12/2018, SSI= 31.2

Exam Date: 15/12/2018, SSI= 30.8



Significance from Normal Map

Significance from Normal Map



Report Date: Saturday December 15 10:15:04 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER-STAR EYE CLINIC & LASER CENTRE

CONSENT FORM FOR ADULT/CHILDREN

NAME:	Mabel Wilson
SEX:	Female
D. O. B:	25th Sept 1965
ID No:	18570

OPERATION CONSENT BY PATIENT/RELATIVE

I, Mabel Wilson

On behalf of My self

Hereby consent to undergo the operation of RECCRE & PCLOL RB

The effect and nature of which has been explained to me

I also consent to such further or alternative measures as may be found to be necessary during the course of such operation and the administration of local or other anaesthetic for the purpose of same

I understand an assurance has not been given that the operation will be performed by a particular surgeon

Signature of Patient/Relative: Mabel Wilson

Date: 23/11/18

I, DR Y. S. ADAM have been this consent before surgery and explained the nature of the operation to patient/relative

Signature of Doctor: Dr Y. S. Adam

Date: 23/11/18



THE TRUST HOSPITAL COMPANY LIMITED

PMB 16, MINISTRIES, ACCRA, TEL: 0302761974-9 Fax:0302777790

Website: www.thetrusthospital.com • **Email:** info@thetrusthospital.com • **Bankers:** Standard Chartered Bank - Osu
Head Office: Oxford Street: Osu, Accra, Ghana

MEDICAL LABORATORY REPORT

LAB No.	118111914	Patient Name	MABEL WILSON
Age	53	Gender	Female
Receipt Type		Organization	
Episode No.	V1181112067	Patient Tel:	
Manual Path. No			

Requested By		Sample Collection Date	12 Nov 2018 09:13:28
Requested From	THE TRUST HOSPITAL - OSU	Received Date	
Diagnosis		Report Date	12 Nov 2018 09:46:26

REQUESTED: FBC, GLUCOSE FASTING (FBS)

FBC -> [LABORATORY]

PARAMETER	FLAG	RESULTS	UNITS	NORMAL RANGES
WBC		5.59	x 10 ⁹ /L	[3.27 - 8.39]
RBC		4.00	x 10 ¹² /L	[3.99 - 5.61]
HB	L	10.8	g/dL	[12.0 - 15.1]
HCT	L	31.7	%	[34.9 - 47.3]
MCV		79.3	fL	[71.1 - 96.1]
MCH		27.0	pg	[23.7 - 31.4]
MCHC		34.1	g/dL	[30.2 - 35.4]
PLT		247	x10 ⁹ /L	[133 - 358]
RDW_SD		42.5	fL	[35.3 - 47.2]
RDW_CV		14.4	%	[12.0 - 15.8]
PDW		13.3	fL	[9.0 - 17.0]
MPV		11.5	fL	[9.4 - 12.4]
P_LCR		34.4	%	[20.6 - 42.2]
PCT		0.28	%	[0.15 - 0.39]
NEUT#		3.37	x10 ⁹ /L	[1.40 - 5.01]
NEUT%		60.4	%	[33.3 - 64.7]
LYM#		1.54	x10 ⁹ /L	[1.24 - 3.23]
LYMPH%	L	27.5	%	[27.7 - 56.5]
MONO#		0.50	x10 ⁹ /L	[0.24 - 0.70]
MONO%		8.9	%	[3.9 - 11.9]
EO#		0.15	x10 ⁹ /L	[0.02 - 0.74]
EO%		2.7	%	[0.4 - 11.8]
BASO#		0.03	x10 ⁹ /L	[0.01 - 0.06]
BASO%		0.5	%	[0.2 - 1.2]

Page 1 of 2



THE TRUST HOSPITAL COMPANY LIMITED

MEDICAL LABORATORY REPORT

PMB 16, MINISTRIES, ACCRA, TEL: 0302761974-9 Fax:0302777790

Website: www.thetrusthospital.com • Email: info@thetrusthospital.com • Bankers: Standard Chartered Bank - Osu

118111914

53

Patient Name:

MABEL WILSON

Head Office: Oxford Street: Osu, Accra, Ghana

Gender:

Female

Receipt Type
Episode No.

Manual Path. No

Organization
Patient Tel:

V1181112067

Requested By
Requested From THE TRUST HOSPITAL - OSU
Diagnosis

Sample Collection Date 12 Nov 2018 09:13:28
Received Date
Report Date 12 Nov 2018 09:46:26

REQUESTED: FBC, GLUCOSE FASTING (FBS)

GLUCOSE FASTING (FBS) -> [LABORATORY]

PARAMETER	FLAG	RESULTS	UNITS	NORMAL RANGES
FBS	H	9.7	mmol/L	[3.9 - 6.1]
Urine Sugar				
Urine Ketones				

Electronically Signed By: Alexis Ali

Page 2 of 2

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INTER STAR EYE CLINIC AND LASER CENTRE

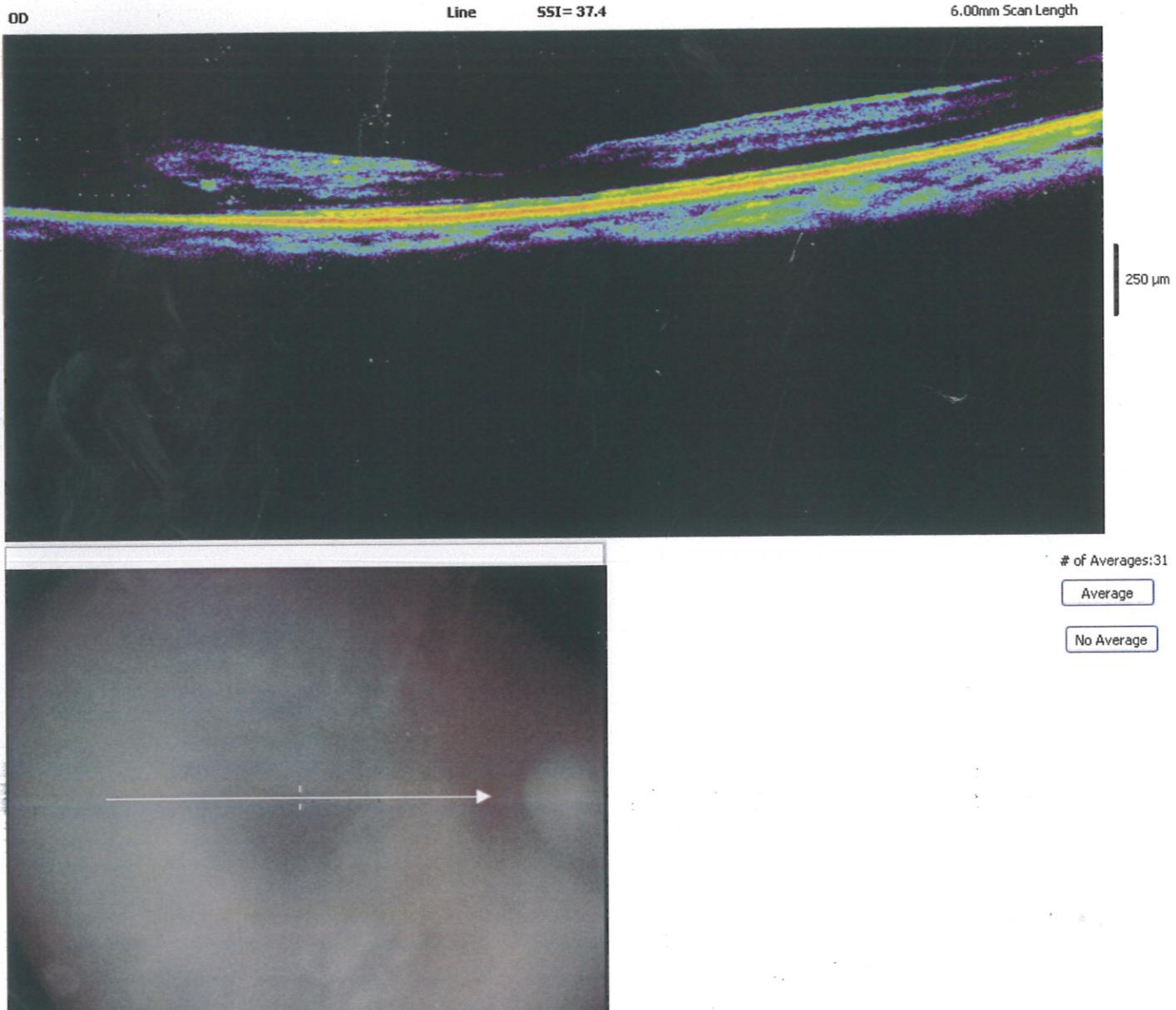
OSU ACCRA . 233277755354

Patient: WILSON, MABEL
Physician: ADAM, Y S DR.
Operator: ASHUN, SUSIE
Disease:

Gender: F
ID: 18570

Exam Date: 06/09/2018
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27

OD



Diagnosis:

(Empty text area for diagnosis)

Report Date: Thursday September 06 16:55:24 2018

Report Date: Thursday September 06 16:55:29 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

OS

Patient: WILSON, MABEL
Physician: ADAM, Y S DR.
Operator: ASHUN, SUSIE
Disease:

Gender: F
ID: 18570

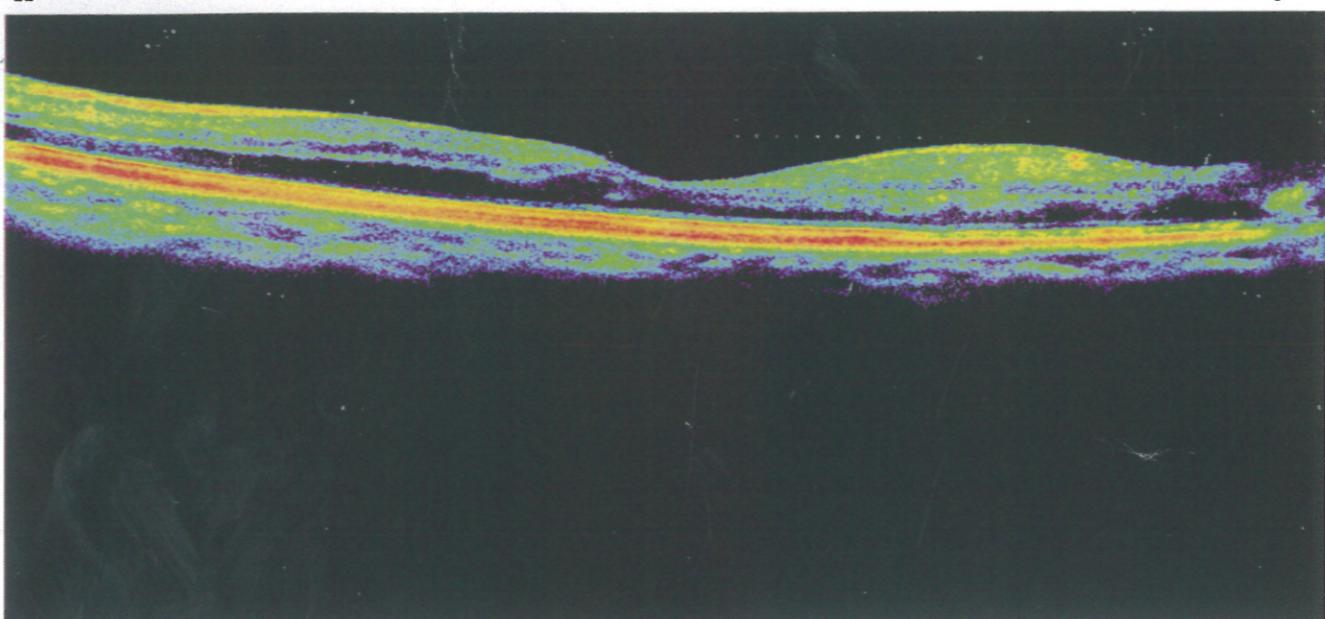
Exam Date: 06/09/2018
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27

OS

Line

SSI = 49.9

6.00mm Scan Length



Diagnosis:

(A large empty box for diagnosis notes.)

Report Date: Thursday September 06 16:55:30 2018

Report Date: Thursday September 06 16:55:34 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

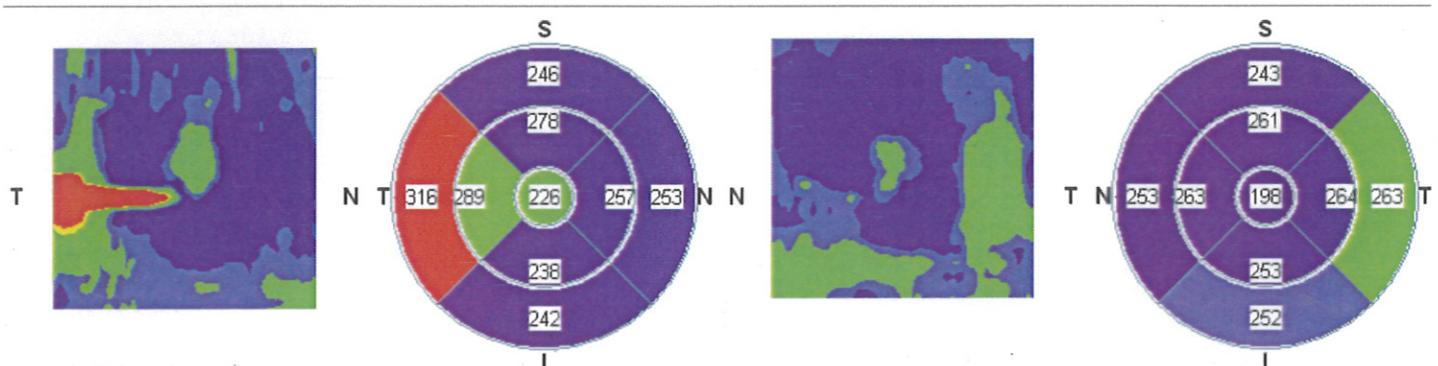
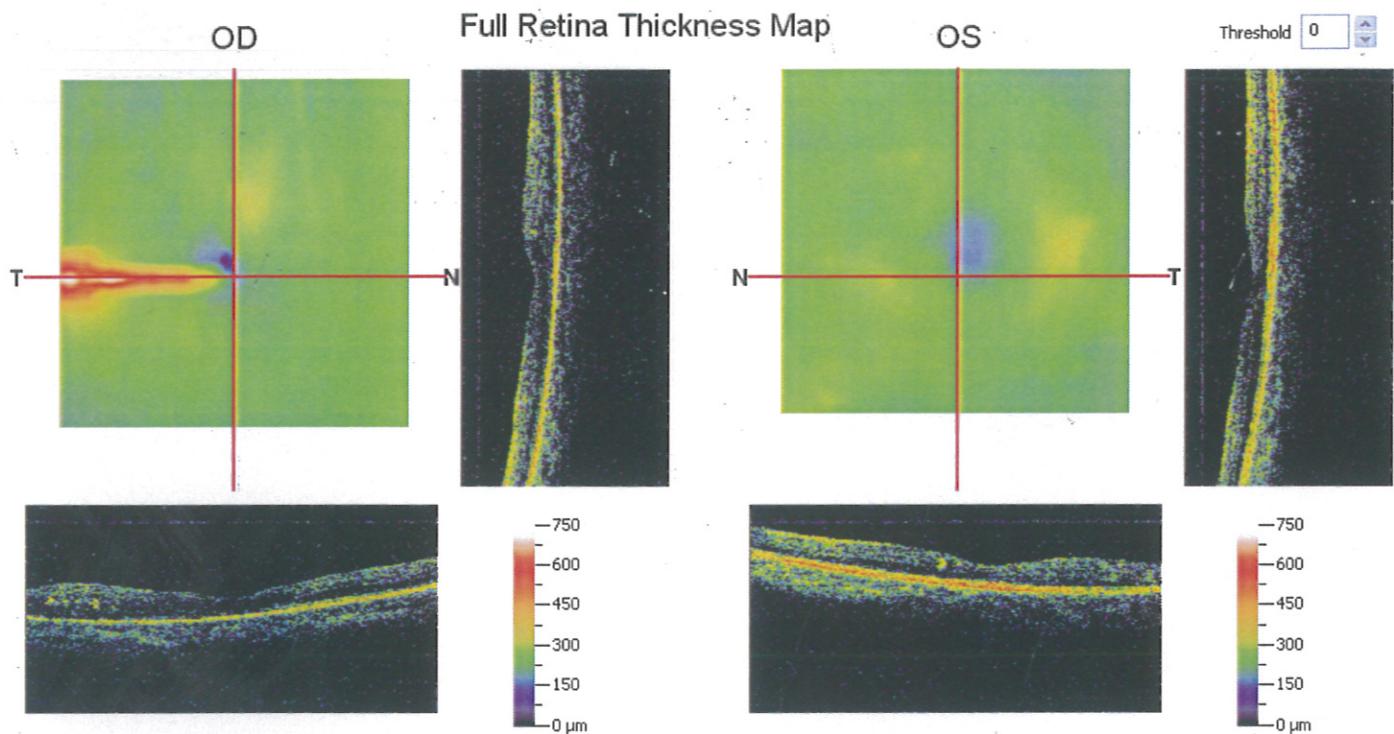
Macula Map(EMM5) Retina Report

Patient: WILSON, MABEL
 Physician: ADAM, Y S DR.
 Operator: ASHUN, SUSIE
 Disease:

Gender: F
 ID: 18570

Exam Date: 06/09/2018
 DOB(age): 25/09/1965 (52)
 Ethnicity: African Descendant
 Algorithm Version: A6, 8, 0, 27

OD/OS



Report Date: Thursday September 06 16:55:55 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

OD

Patient: WILSON, MABEL
Physician:
Operator:
Disease:

Gender: F
ID:

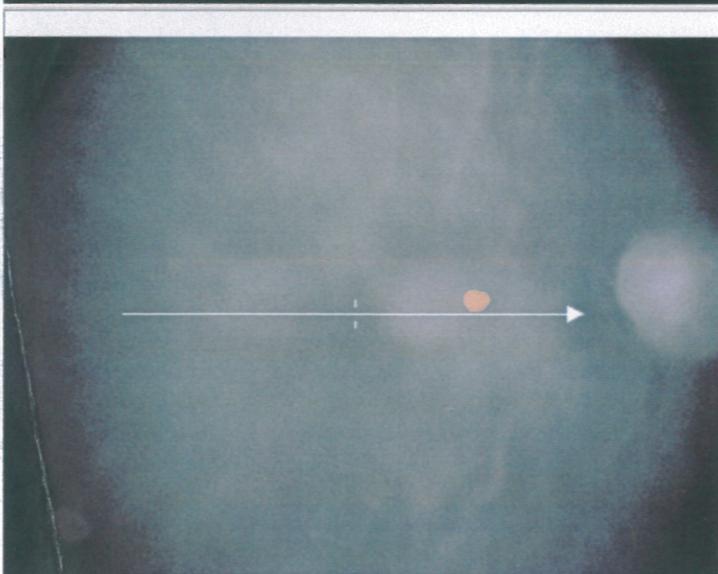
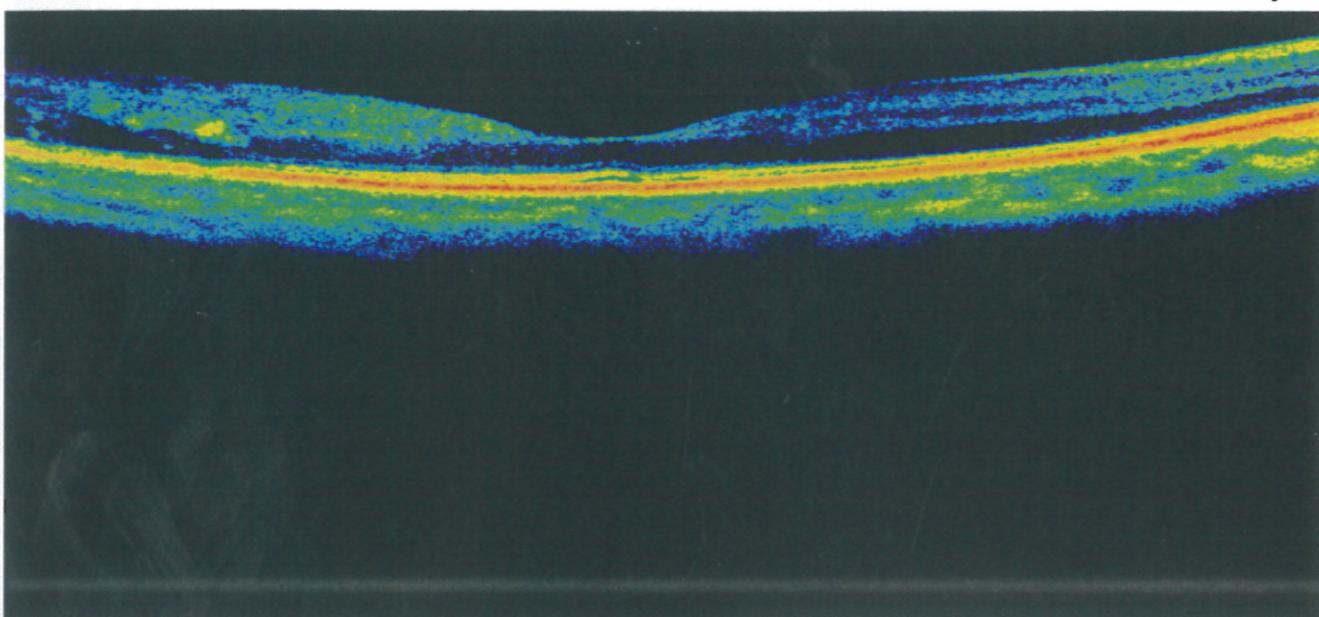
Exam Date: 18/01/2018
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27

OD

Line

SSI = 42.1

6.00mm Scan Length



of Averages: 25

Average

No Average

Diagnosis:

Report Date: Thursday January 18 12:32:31 2018

Report Date: Thursday January 18 12:32:37 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

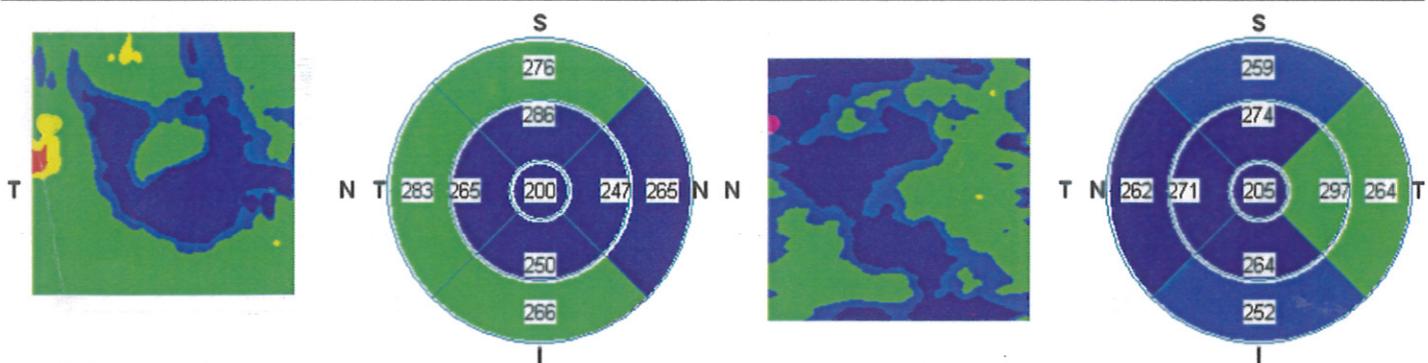
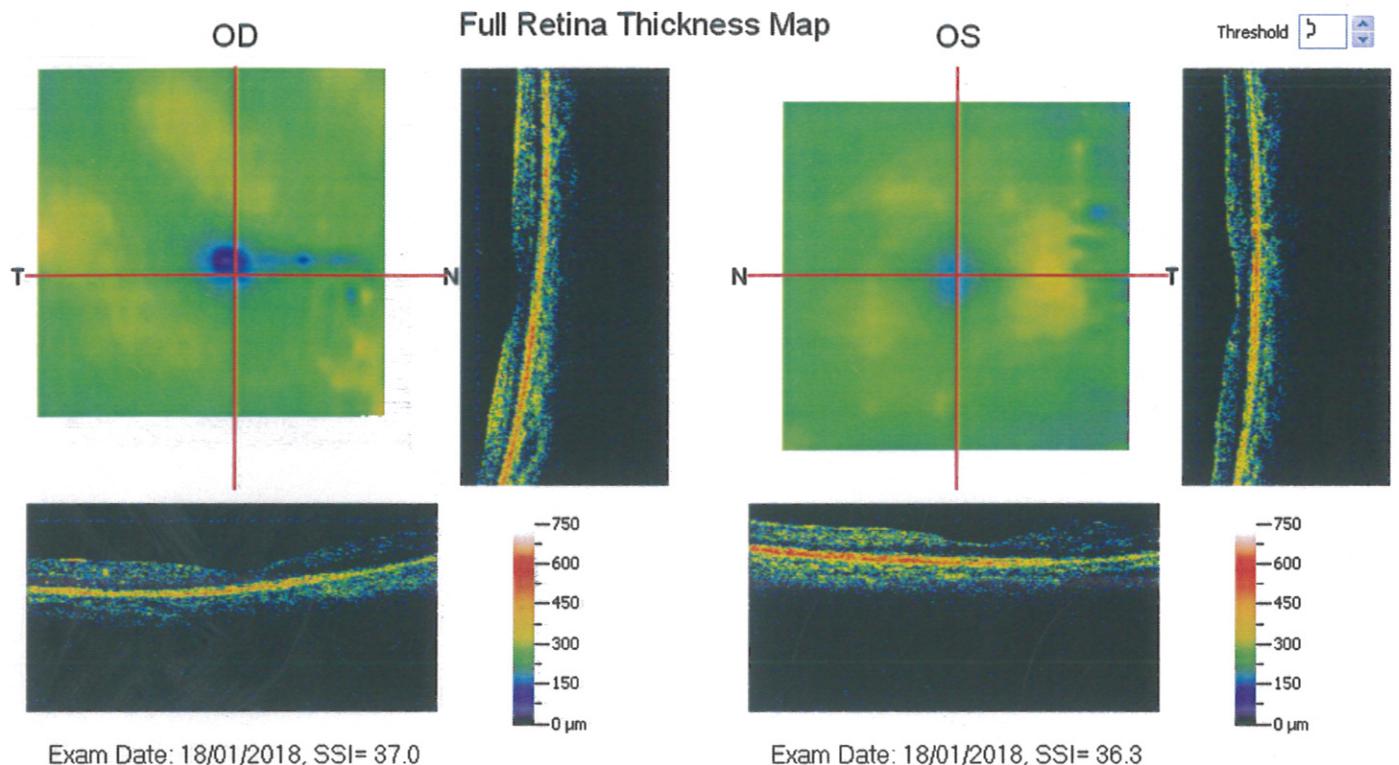
Macula Map(EMM5) Retina Report

OD/OS

Patient: WILSON, MABEL
 Physician:
 Operator:
 Disease:

Gender: F
 ID:

Exam Date: 18/01/2018
 DOB(age): 25/09/1965 (52)
 Ethnicity: African Descendant
 Algorithm Version: A6, 8, 0, 27



Significance from Normal Map

Global RPE/Choroid Disruption

D>15um
D>8um
D=8um
D<8um
D<15um

OD OS
 101 71

p>99% Outside Normal
p>95% Borderline
p>5% Within Normal
p<5% Borderline
p<1% Outside Normal

Report Date: Thursday January 18 12:35:48 2018

Software Version #6, 8, 0, 27

Comments:

Nature:

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INTER STAR EYE CLINIC AND LASER CENTRE

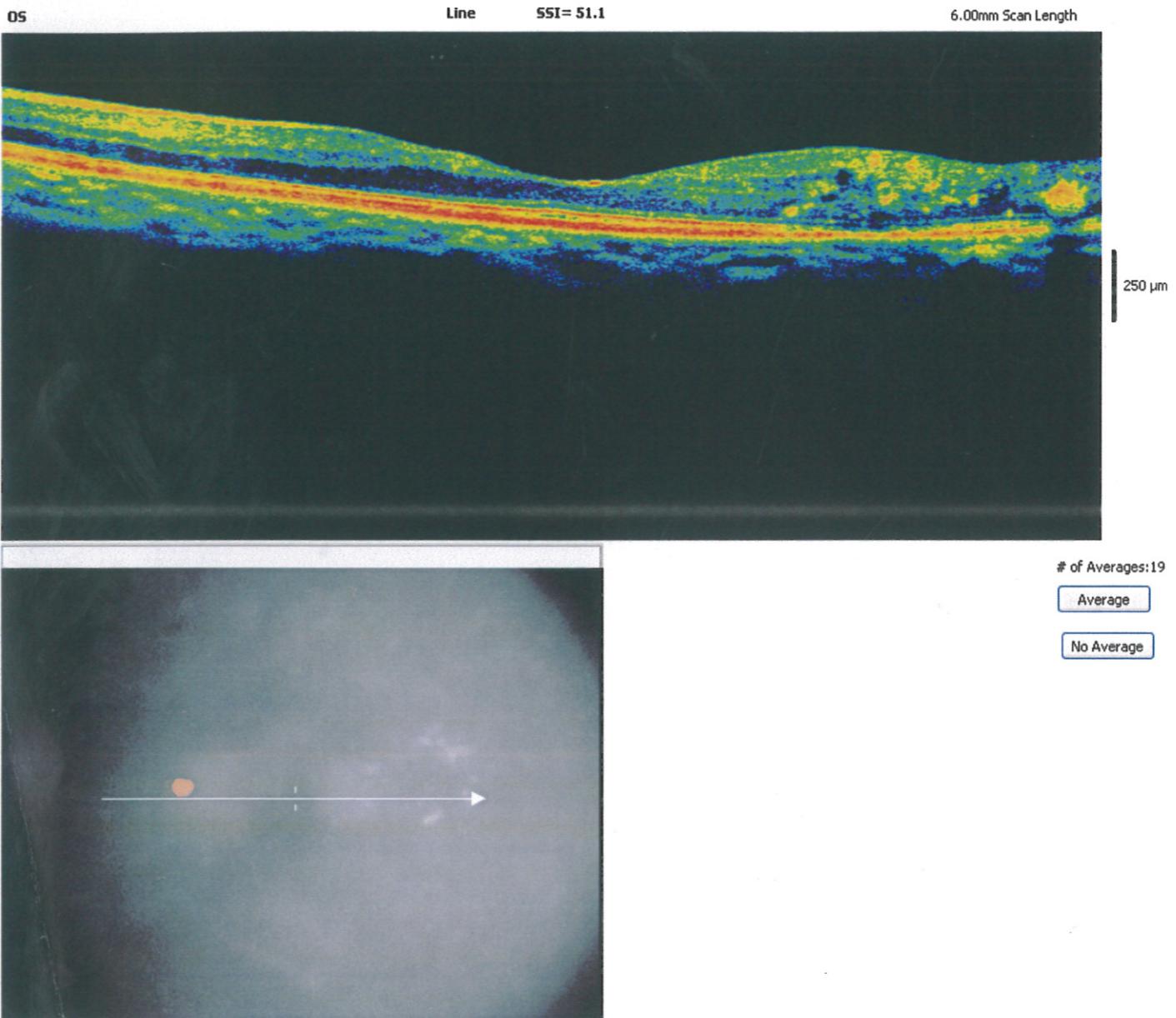
OSU ACCRA . 233277755354

OS

Patient: WILSON, MABEL
Physician:
Operator:
Disease:

Gender: F
ID:

Exam Date: 18/01/2018
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27



Diagnosis:

Report Date: Thursday January 18 12:32:38 2018

Report Date: Thursday January 18 12:32:43 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

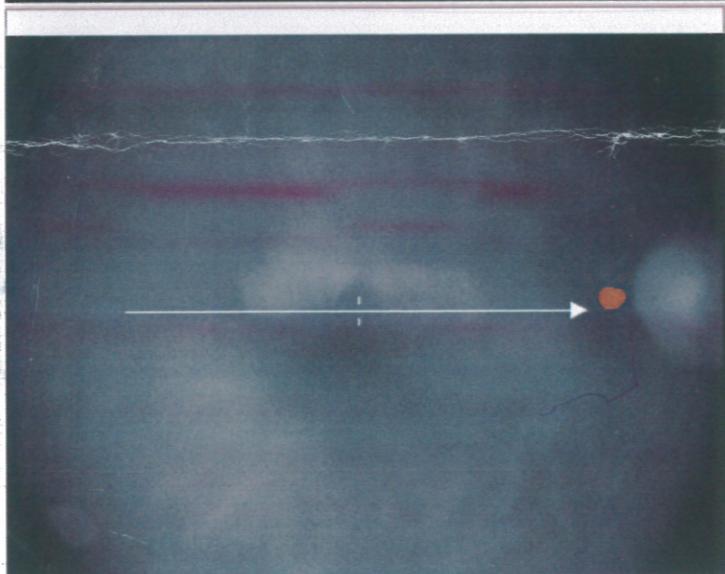
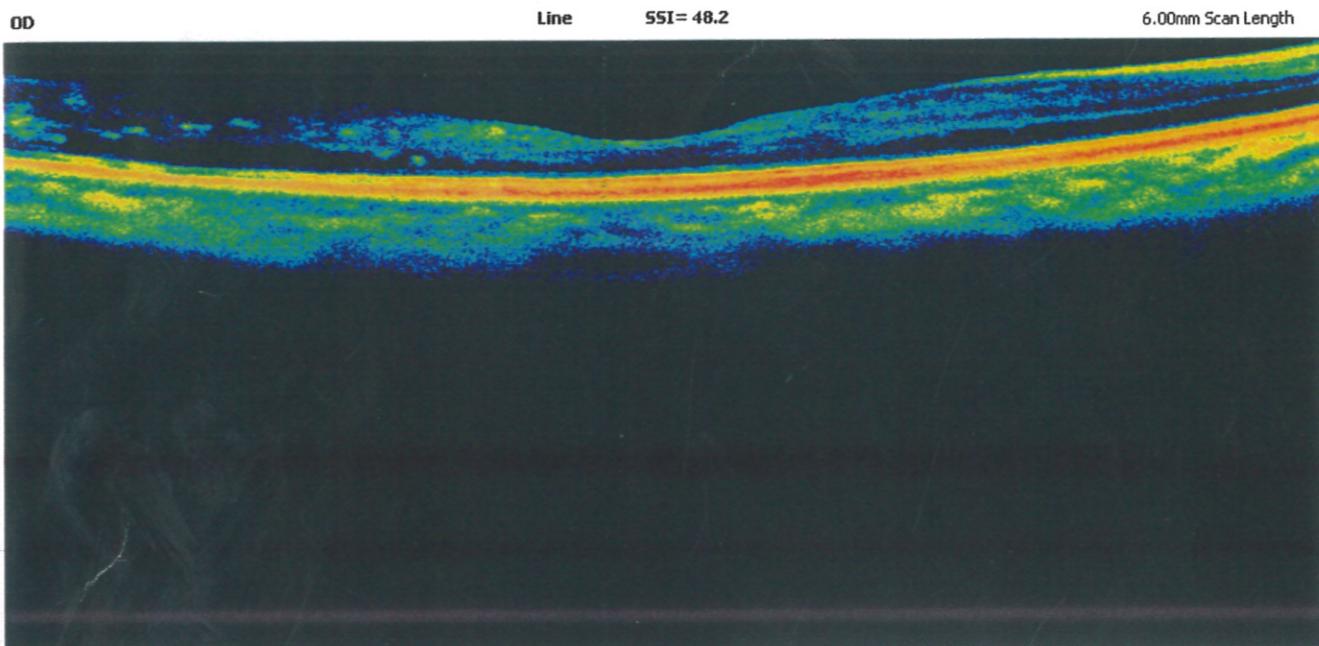
OSU ACCRA . 233277755354

OD

Patient: WILSON, MABEL
Physician:
Operator: E., LOVERENCE
Disease:

Gender: F
ID:

Exam Date: 19/10/2017
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27



Diagnosis:

(Empty text box for diagnosis)

Report Date: Thursday October 19 16:04:44 2017

Report Date: Thursday October 19 16:04:53 2017

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

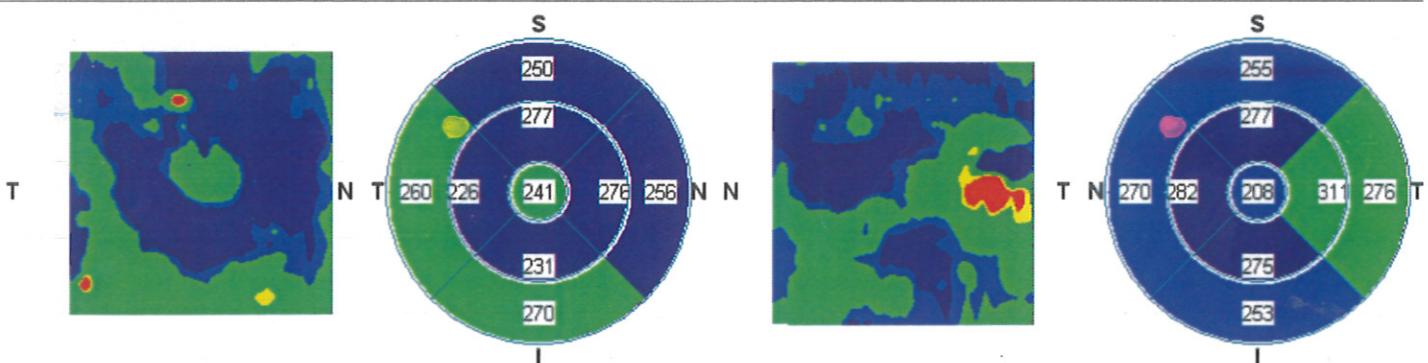
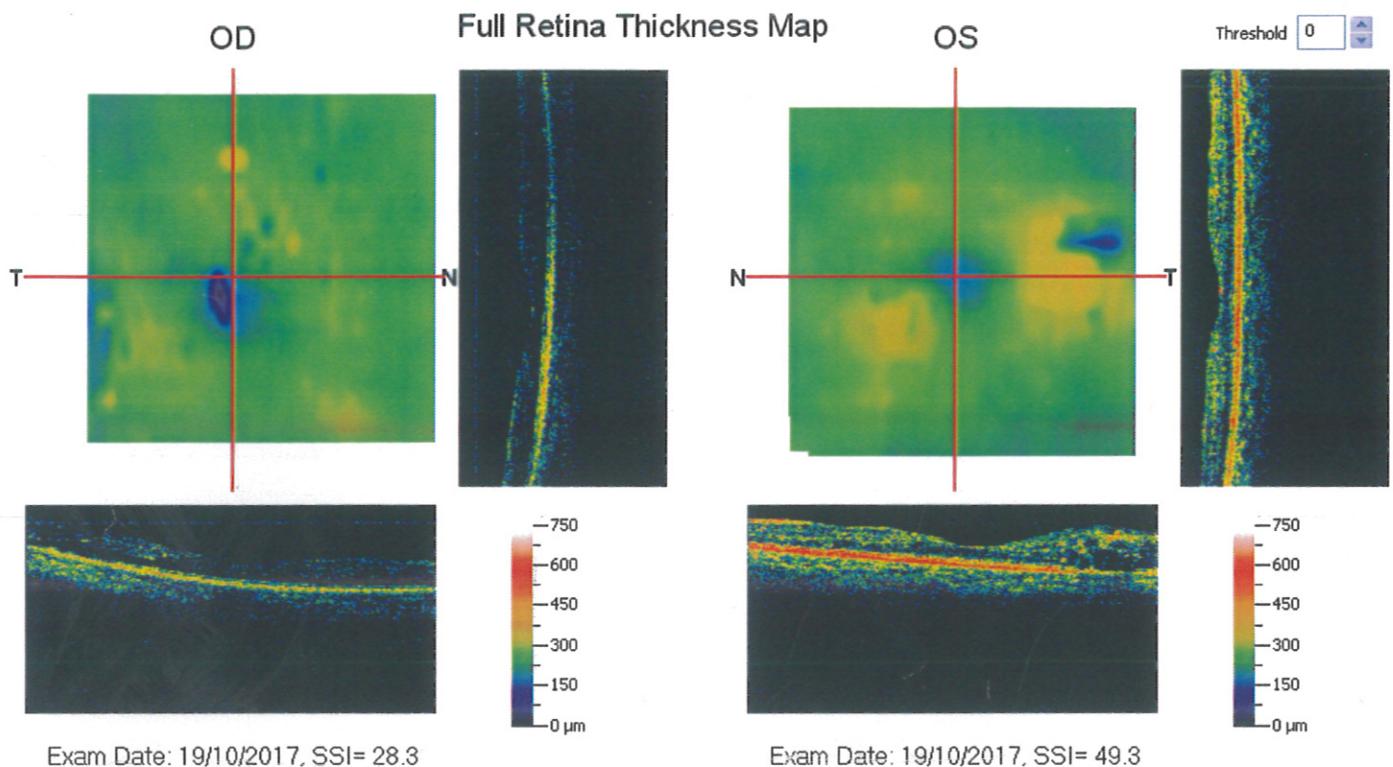
OD/OS

Macula Map(EMM5) Retina Report

Patient: WILSON, MABEL
 Physician:
 Operator: E., LOVERENCE
 Disease:

Gender: F
 ID:

Exam Date: 19/10/2017
 DOB(age): 25/09/1965 (52)
 Ethnicity: African Descendant
 Algorithm Version: A6, 8, 0, 27



Significance from Normal Map



Significance from Normal Map



Report Date: Thursday October 19 16:11:59 2017

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

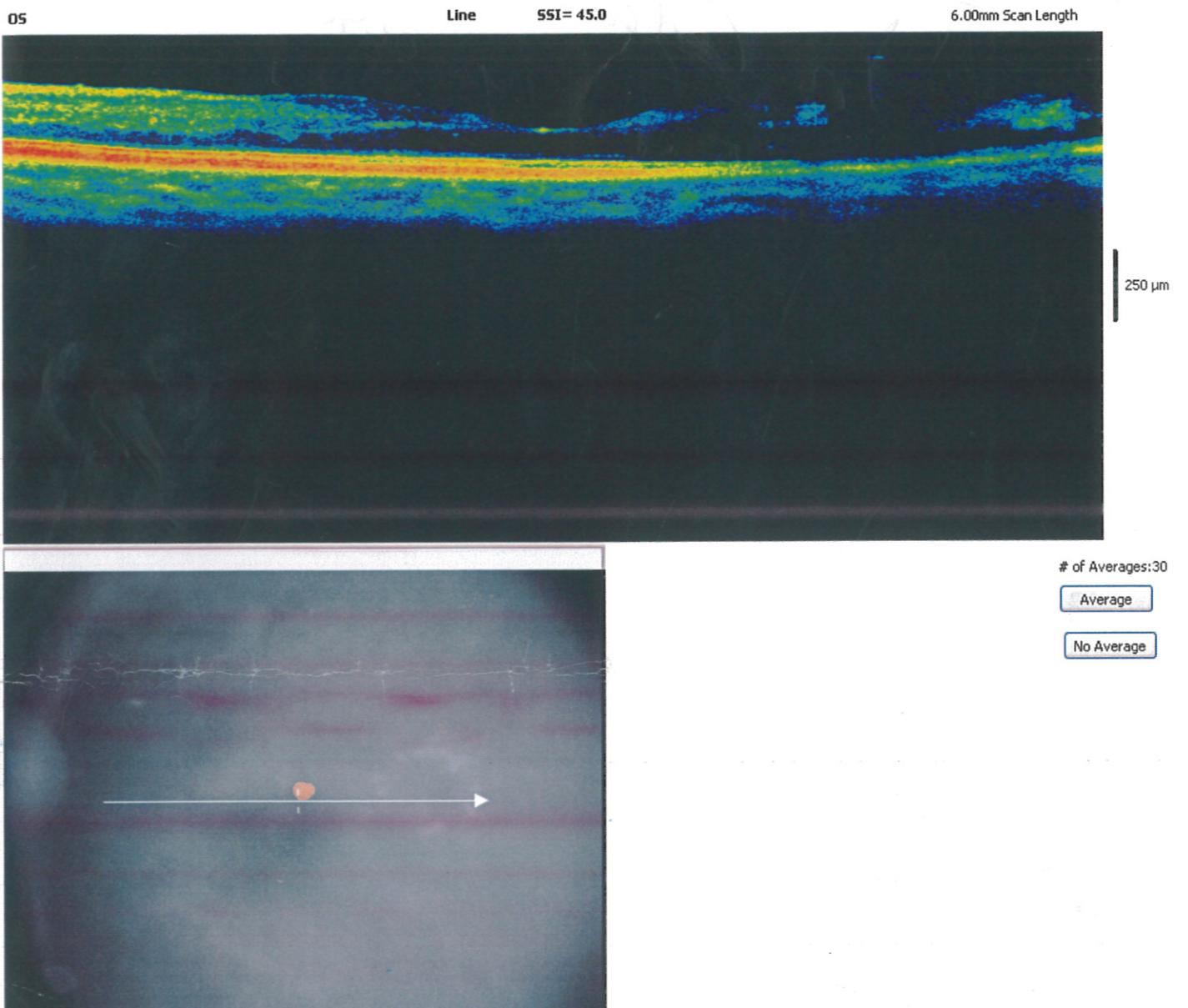
OSU ACCRA . 233277755354

OS

Patient: WILSON, MABEL
Physician:
Operator: E., LOVERENCE
Disease:

Gender: F
ID:

Exam Date: 19/10/2017
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27



Diagnosis:

Report Date: Thursday October 19 16:04:55 2017

Report Date: Thursday October 19 16:05:03 2017

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

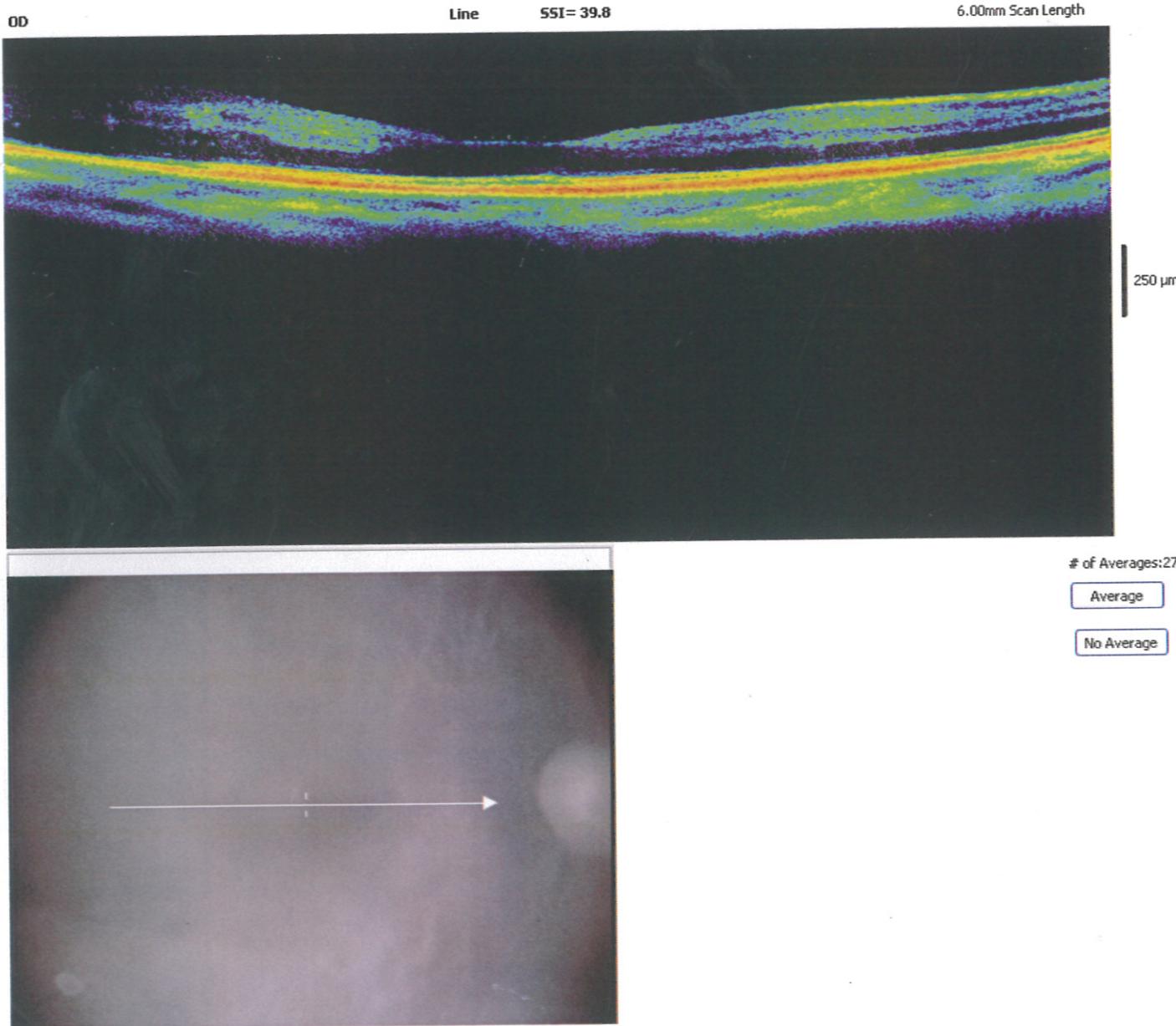
OSU ACCRA . 233277755354

OD

Patient: WILSON, MABEL
Physician:
Operator: E., LOVERENCE
Disease:

Gender: F
ID: 18570

Exam Date: 26/06/2018
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27



Diagnosis:

Report Date: Tuesday June 26 15:24:11 2018

Report Date: Tuesday June 26 15:24:15 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

OSU ACCRA . 233277755354

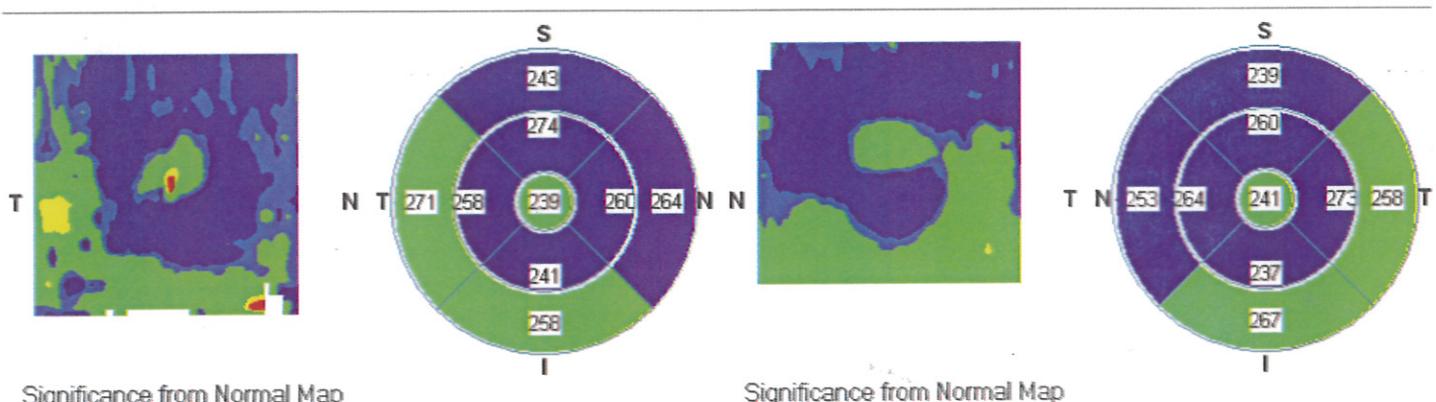
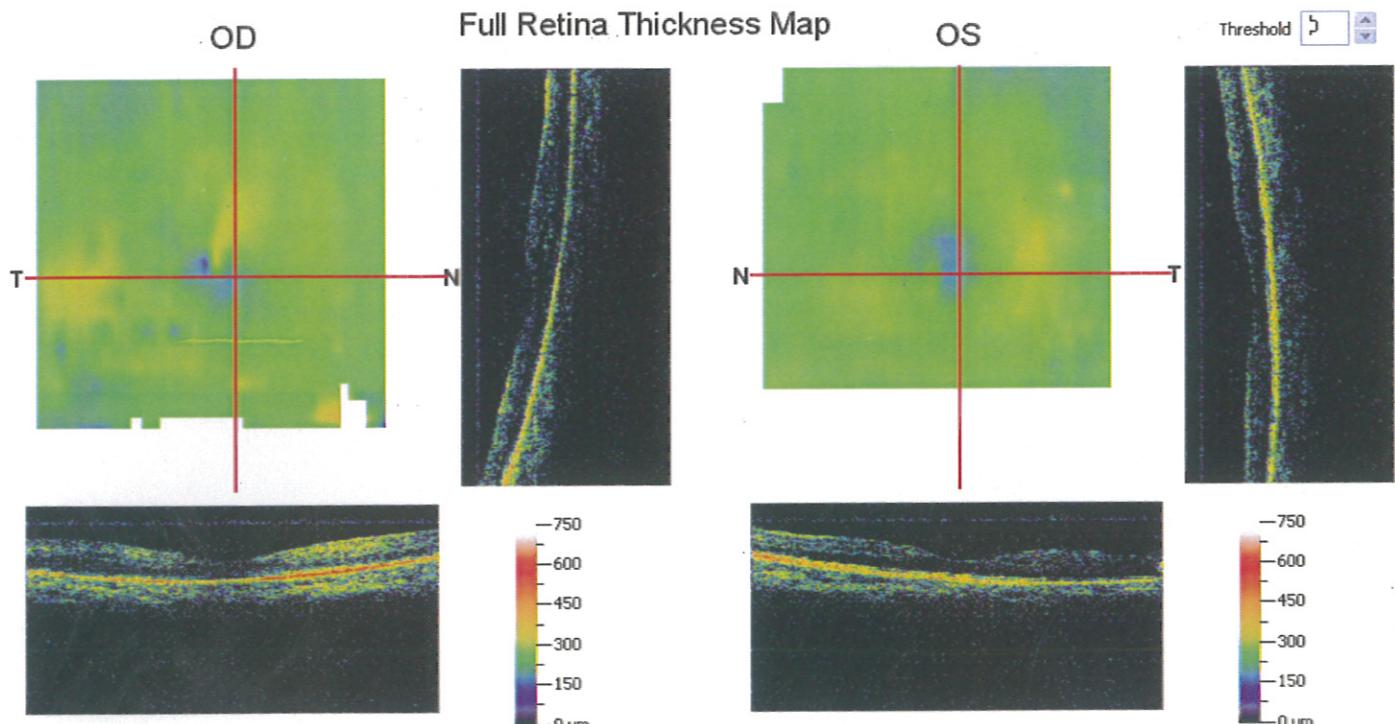
OD/OS

Macula Map(EMM5) Retina Report

Patient: WILSON, MABEL
Physician:
Operator: E., LOVERENCE
Disease:

Gender: F
ID: 18570

Exam Date: 26/06/2018
DOB(age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27



Report Date: Tuesday June 26 15:24:49 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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INTER STAR EYE CLINIC AND LASER CENTRE

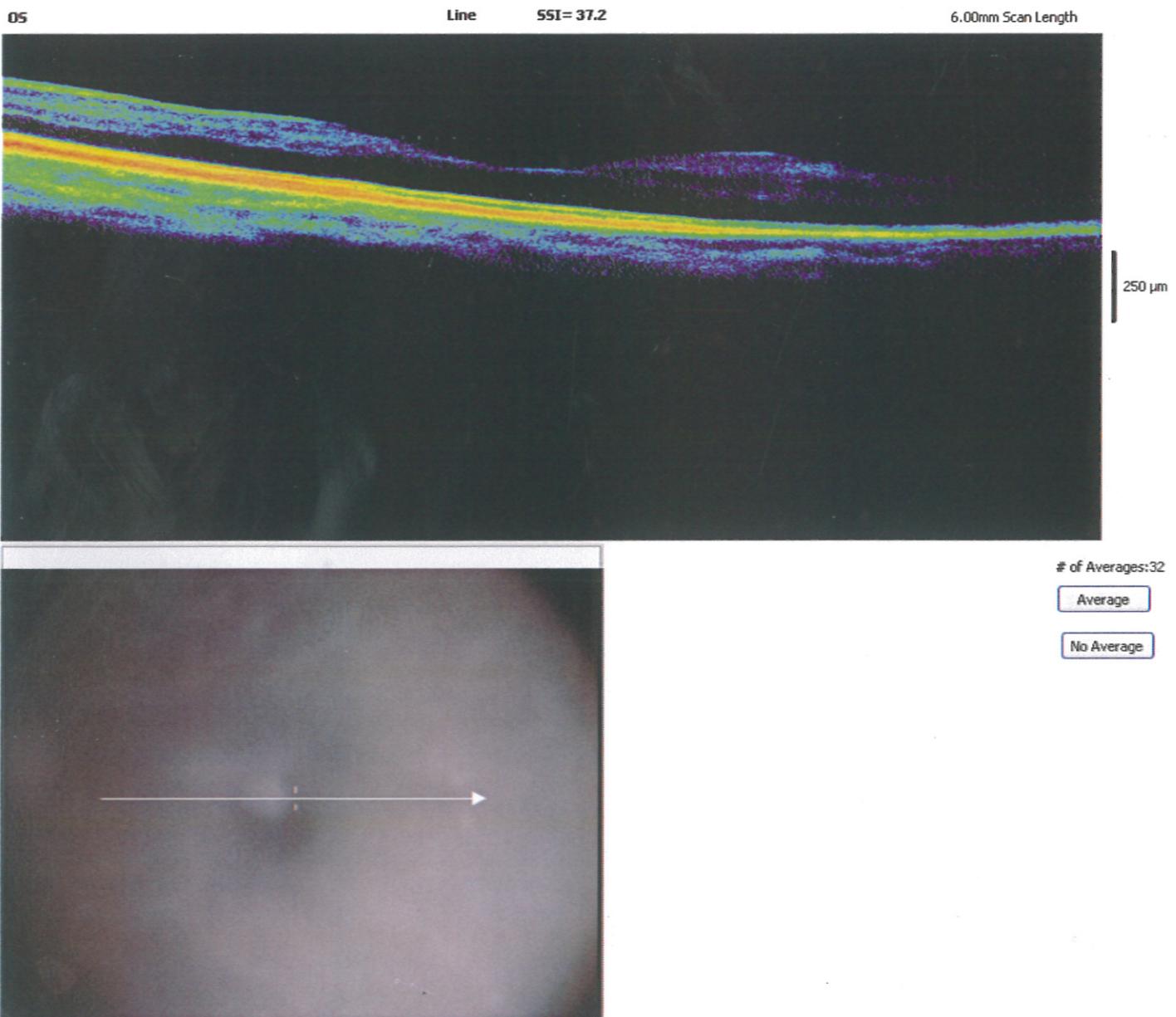
OSU ACCRA . 233277755354

OS

Patient: WILSON, MABEL
Physician:
Operator: E., LOVERENCE
Disease:

Gender: F
ID: 18570

Exam Date: 26/06/2018
DOB (age): 25/09/1965 (52)
Ethnicity: African Descendant
Algorithm Version: A6, 8, 0, 27



Diagnosis:

(Empty text box)

Report Date: Tuesday June 26 15:24:16 2018

Report Date: Tuesday June 26 15:24:21 2018

Software Version #6, 8, 0, 27

Comments:

Signature:

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