

SURNAMES (Block Letters)  
Tagoe

FIRST NAMES  
Evelyn

Sex  
Female

PHONE NUMBER.....027-9278895

ADDRESS OR RESIDENTIAL.....ACCRA

OCCUPATION  
Trader

MARITAL STATUS			
MARRIED	DIVORCED	SINGLE	OTHER
		✓	

DATE OF BIRTH 1/02/	AGE 55
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PLACE OF BIRTH  
ACCRA

ANY ALLEGIC REACTION  
TO MEDICINE  
Yes

NATIONALITY

RELIGION

DATE OF FIRST ATTENDANCE  
18/08/17

NEXT OF KIN Muratu	ADDRESS OR PHONE No. OF NEXT OF KIN 027-9278895
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# INTERSTAR EYE CLINIC & LASER CENTRE

NAME TAGOR Evelyn

CARD NUMBER 17783

DATE 18/08/17

% Blurred vision in RE for 2 yrs.

DM<sup>2</sup>, HPT<sup>+</sup> (on tabs), Not on any drops.

UR 6/24wa, 6/1

RL 6/24wa, 6/18pt

BU quite

— lens — RCL covered

PRC  
at least  
4/103

— fuchs — 4/103

plus

① R/L Phaco + DR

② FUS. FUS

③ T. neovascular  
and  
BR

SN 4/52

IM  
1313

SYMPTOMS & HISTORY		OCCUPATION HOBBIES	
EXTERNAL EXAMINATION OPHTHALMOSCOPY		FIELD TONOMETRY COLOUR ETC	
OPHTHALMOSCOPY	SUBJECTIVE	ACCOMMODATION	
6/24us 6/24u	6/R $\overline{+2.00 DS}$ $\overline{+1.00 DS}$ 6/L $-3.00 DS$ Binoc ADD	= 6/24 R Rdg ADD 7 6/24 = 6/24 L = N	
MUSCLE BALANCE		RETEST DATE	
Auto R Error L Error Doesn't read			