

URNAMES (Block Letters)
ADAI KYENKYENE

FIRST NAMES
MILDRED

Sex
F

PHONE NUMBER.....0243369460

ADDRESS OR RESIDENTIAL.....KWABENYA

OCCUPATION
SCHOOLING

MARITAL STATUS			
MARRIED	DIVORCED	SINGLE	OTHER
			✓

DATE OF BIRTH
1/06/2004

AGE
12

PLACE OF BIRTH
KUMASI

ANY ALLERGIC REACTION
TO MEDICINE
No

NATIONALITY
ANIAN

RELIGION
CHRISTIAN

DATE OF FIRST ATTENDANCE

NEXT OF KIN
Anders Addai

ADDRESS OR PHONE No. OF NEXT OF KIN
0243369460



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 HOUSE _____ WORK _____

ADDRESS: _____ DATE OF BIRTH _____

DATE OF TEST	R								PRESCRIPTION GIVEN			
		Sph	Cyl	Axis	Prism	Sph	Cyl	Axis	Prism			
7-7-16	Dist											
P.D.	Inter											
	Read											

HEIGHTS		MONO		BLANK	TECH SIG. CHECKED
R	L	R	L		

DISPENSING NOTES	FRAME	DESCRIPTION	GH¢	P
	LENSES			
	COATING			
	SUNDRIES			
		TOTAL		
		VOUCHER		
		BALANCE		
		DEPOSIT		
		BALANCE		

PLEASE TICK
CASH ☐ CHEQUE ☐ CREDIT CARD ☐

DISPENSED BY	CHECKED BY	RECEIVED BY	DATE
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SYMPTOMS & HISTORY		OCCUPATION HOBBIES	
EXTERNAL EXAMINATION OPHTHALMOSCOPY		FIELD TONOMETRY COLOUR ETC.	
OPHTHALMOSCOPY	SUBJECTIVE		ACCOMMODATION
6/5 _{ud} 6/5 _{ud}	6/R plan 6/L plan Binoc ADD	= 6/5 ^R = 6/5 ^L	Rdg ADD 76/5 ^L = N
MUSCLE BALANCE			RETEST DATE
<u>Auto</u> R - 0.25 - 0.75 x 0 L - 0.50 - 0.50 x 173.			