

URNAMES (Block Letters)  
0201

FIRST NAMES  
SIMPSON

Sex  
M

PHONE NUMBER.....0204310852

ADDRESS OR RESIDENTIAL.....8 CANTONMENTS ROAD  
ACRA

OCCUPATION  
OPERATIONS DIRECTOR

MARITAL STATUS			
MARRIED	DIVORCED	SINGLE	OTHER
✓			

DATE OF BIRTH  
23/09/73

AGE  
43

PLACE OF BIRTH  
LONDON

ANY ALLEGIC REACTION  
TO MEDICINE  
N/A

NATIONALITY  
BRITISH

RELIGION  
N/A

DATE OF FIRST ATTENDANCE  
18/5/17

NEXT OF KIN  
NANA 0201

ADDRESS OR PHONE No. OF NEXT OF KIN  
SAME 0200208279



# INTERSTAR EYE CLINIC & LASER CENTRE

NAME: SIANEY Odeh

CARD NUMBER: 16603

DATE: 18/5/17

9/c Difficulty driving at night.

Dm  $\phi$ , HPT  $\phi$ , scd  $\phi$ , Astigmat  $\phi$ .

VR 6/60

U. 6/5<sup>2</sup>

A  
10 10

② - wd - ②

- Cor - -

Clear - Cornea Clear

OK - OK - OK

OK - Pupil - OK

Clear - Lens - Clear

9.03 - Fundus - 9.03

Imp. Refraction 6m

1. Prescribe glasses  
2. See 3m

Ref

16603



# 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: Interstareyeclinik@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			
18-5-17	Dist	plw				plw	-0.25	90				
P.D.	Inter											
66mm	Read	4.75				4.75						

HEIGHTS		MONO		BLANK		TECH SIG. CHECKED	
R 22.5	L 22	R	L				

DISPENSING NOTES	DESCRIPTION		GH¢ P	
	FRAME			
	LENSES	CAIR Progressive	350.00	
	COATING			
	SUNDRIES			

PLEASE TICK CASH <input type="checkbox"/> CHEQUE <input type="checkbox"/> CREDIT CARD <input type="checkbox"/>	TOTAL	350.00
	VOUCHER	paid 21/8/17
	BALANCE	
	DEPOSIT	
	BALANCE	

DISPENSED BY	CHECKED BY	RECEIVED BY	DATE
			24/8/17

SYMPTOMS & HISTORY		OCCUPATION HOBBIES	
EXTERNAL EXAMINATION OPHTHALMOSCOPY		FIELD TONOMETRY COLOUR ETC.	
OPHTHALMOSCOPY	SUBJECTIVE		ACCOMMODATION
6/5u 6/5u	6/R plus 6/L plus/-0.25 x 90 = 6/5 Binoc ADD		R Rdg ADD 7.6/5 = N 5
MUSCLE BALANCE		RETEST DATE	
Auto R plus/-0.50 x 66 L +0.25/-0.50 x 95		Add +1.75 DS J2	