

SURNAMES (Block Letters)

ACQUAH

FIRST NAMES

ERNEST

Sex

M

PHONE NUMBER.....

0540107711 / 0244132211

ADDRESS OR RESIDENTIAL.....

BA HSE #84 ATTA MOSES DOWN
GICEL ESTATE NEW WEITA

OCCUPATION

ACCOUNTANT

MARITAL STATUS

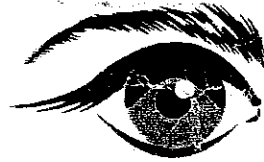
MARRIED

DIVORCED

SINGLE

OTHER

✓



INTER-STAR EYE CLINIC & LASER CENTRE

NAME: Ernest Aequah

CARD NUMBER: 18242

DATE: 26-9-17

1/2 blurred vision in BS for 2 1/2 hrs

DM ϕ scd ϕ , A&A ϕ , HPT ϕ - GSPD⁺ deficient

VR 6/6w

VR 6/6w

BU Jute

4/6 4 - fakes - 8/6 4

J4
14/13

Mans

O 0800

su 2/92

2. 11.12

q_u : FR revised. Unable to use programme lenses effectively

v_R : 6/6ue

v_L : 6/6ue

A
13 13

Qret - A/S - Qret

q_{304} - bus - q_{304}

11/1: Requests separate distance and rear planes
2 See 3/12

AG

18942



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 26-9-17		R PRESCRIPTION GIVEN							
		Sph	Cyl	Axis	Prism	Sph	Cyl	Axis	Prism
Dist		plano	0.50	90		plano	0.75	90	
P.D. 73mm		Inter							
		Read	H.25			H.25			
HEIGHTS R 25 L 25		MONO R L		BLANK		TECH SIG. CHECKED			
DISPENSING NOTES 2/11/17 Another order Frame - own lense - slv photo AIR 160.00		<div> <div>Full black plastic</div> <div>DESCRIPTION</div> <div>GH¢ P</div> </div> <div> <div>FRAME</div> <div>PLD 1P 007-793140</div> <div>400.00</div> </div> <div> <div>LENSES</div> <div>plano 4x prog.</div> <div>680.00</div> </div> <div> <div>COATING</div> <div></div> <div></div> </div> <div> <div>SUNDRIES</div> <div></div> <div></div> </div>							
Frame - L700655 - 16 140 - 180 - 00		TOTAL		240 1050.00					
lense slv white - 80.00		VOUCHER		paid 24/11/17					
Total - 350.00		BALANCE							
PLEASE TICK		DEPOSIT							
CASH <input type="checkbox"/>		DEPOSIT							
CHEQUE <input type="checkbox"/>		BALANCE							
CREDIT CARD <input type="checkbox"/>		DATE		6/10/17					
DISPENSED BY		CHECKED BY		RECEIVED BY		DATE			

23/11/17

SYMPTOMS & HISTORY		OCCUPATION HUBBIES	
EXTERNAL EXAMINATION OPHTHALMOSCOPY		FIELD TONOMETRY COLOUR ETC.	
OPHTHALMOSCOPY	SUBJECTIVE	ACCOMMODATION	
6/6ue 6/6us	6/R $\text{Plasol}-0.50 \times 90 = 6/5$ 6/L $\text{Plasol}-0.75 \times 90 = 6/5$ Binoc ADD	R Rdg ADD $7/6/5$ L = N 5	
MUSCLE BALANCE		RETEST DATE	
<u>Auto</u> R $+0.25/-0.50 \times 79$ L $\text{Plasol}-0.75 \times 106$		32	