

RNAMES (Block Letters)
ASANA

FIRST NAMES

ESTHER

Sex

F

PHONE NUMBER.....
027 5081938

DRESS OR RESIDENTIAL.....
MADINA

CUPATION

~~TRADE~~ TRADER

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

OF BIRTH
3/1974

AGE
42(YRS)

PLACE OF BIRTH

ACCRA

ANY ALLEGIC REACTION
TO MEDICINE
—

IONALITY
ANIAN

RELIGION

CHRISTIAN

DATE OF FIRST ATTENDANCE

19/09/2016

EXT OF KIN

EPH ASANA

ADDRESS OR PHONE No. OF NEXT OF KIN

0272171606 MADINA

— 19/9/16



INTER-STAR EYE CLINIC & LASER CENTRE

NAME: Mrs. Esther Asang
DATE: 19/9/2016

CARD NUMBER: 13457

% progressive loss of vision in RE for <1yr.

Dm⁺, HPT⁺, SCD⁺,

VR NPL

VR 6/50

Rv eye - A/C - good

oval - pupillary reaction

non-reactive

pedR - lens - clear

D/P

12/14 subtotal RD fundus - 9/10/55

S-T flat

(poor view)

Plan

O O/T (E)

(R+FC)

OTr - 116 /avg refc

Plan
① Refresh Test

② Begin bei
Kes

Su y
n

INTER-STAR EYE CLINIC

5th Lane, Hse. No F525/1 Osu . 0302783832

OS

Patient: ASANA, Esther
 Physician: ADAM, Y. S.
 Operator: Ahiabor, Edem K
 Disease:

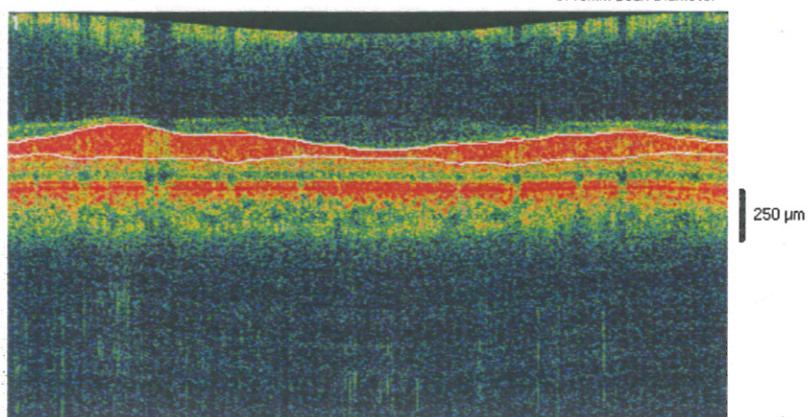
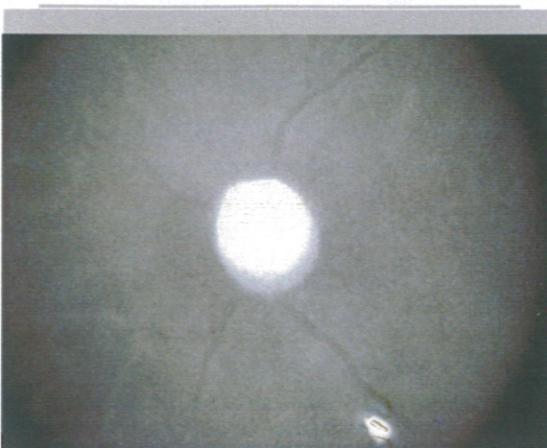
Gender: F
 ID:

Exam Date: 19/09/2016
 DOB (age): 15/03/1974 (42)
 Ethnicity:
 Algorithm Version: A6, 1, 0, 4

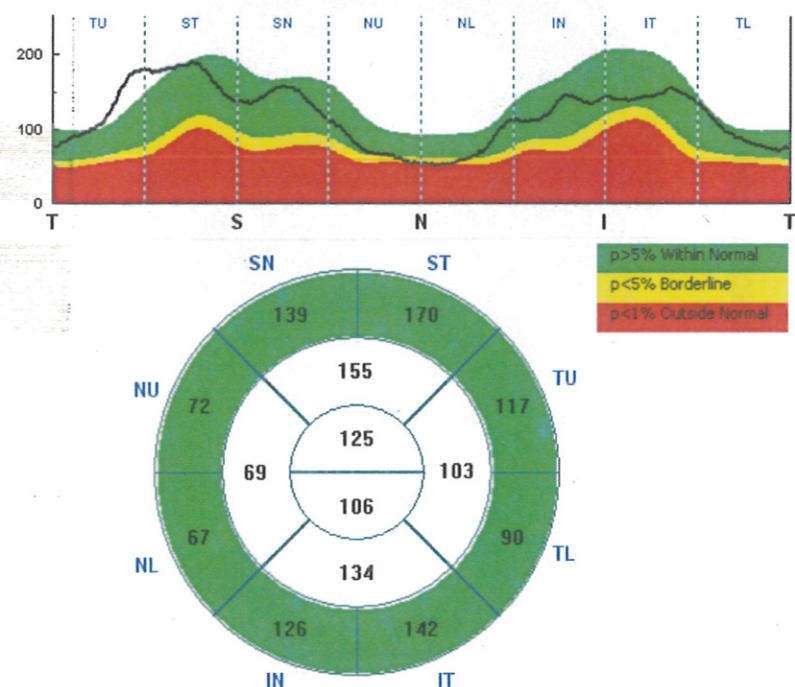
OS

RNFL3.45 SSI= 79.8

3.45mm Scan Diameter



Section	Thickness (μm)
Std Dev Of RNFL =	2.46
Overall RNFL =	115
S. Hemisphere =	124
I. Hemisphere =	106
TEMPO	103
TL	90
TU	116
SUPERIOR	155
ST	170
SN	139
NASAL	70
NU	72
NL	67
INFERIOR	134
IN	126
IT	142



Diagnosis:

Report Date: Monday September 19 14:25:14 2016

Report Date: Monday September 19 14:25:23 2016

Software Version #6, 1, 0, 4

Comments:

Signature:

Defining the OCT Revolution

optovue

INTER-STAR EYE CLINIC

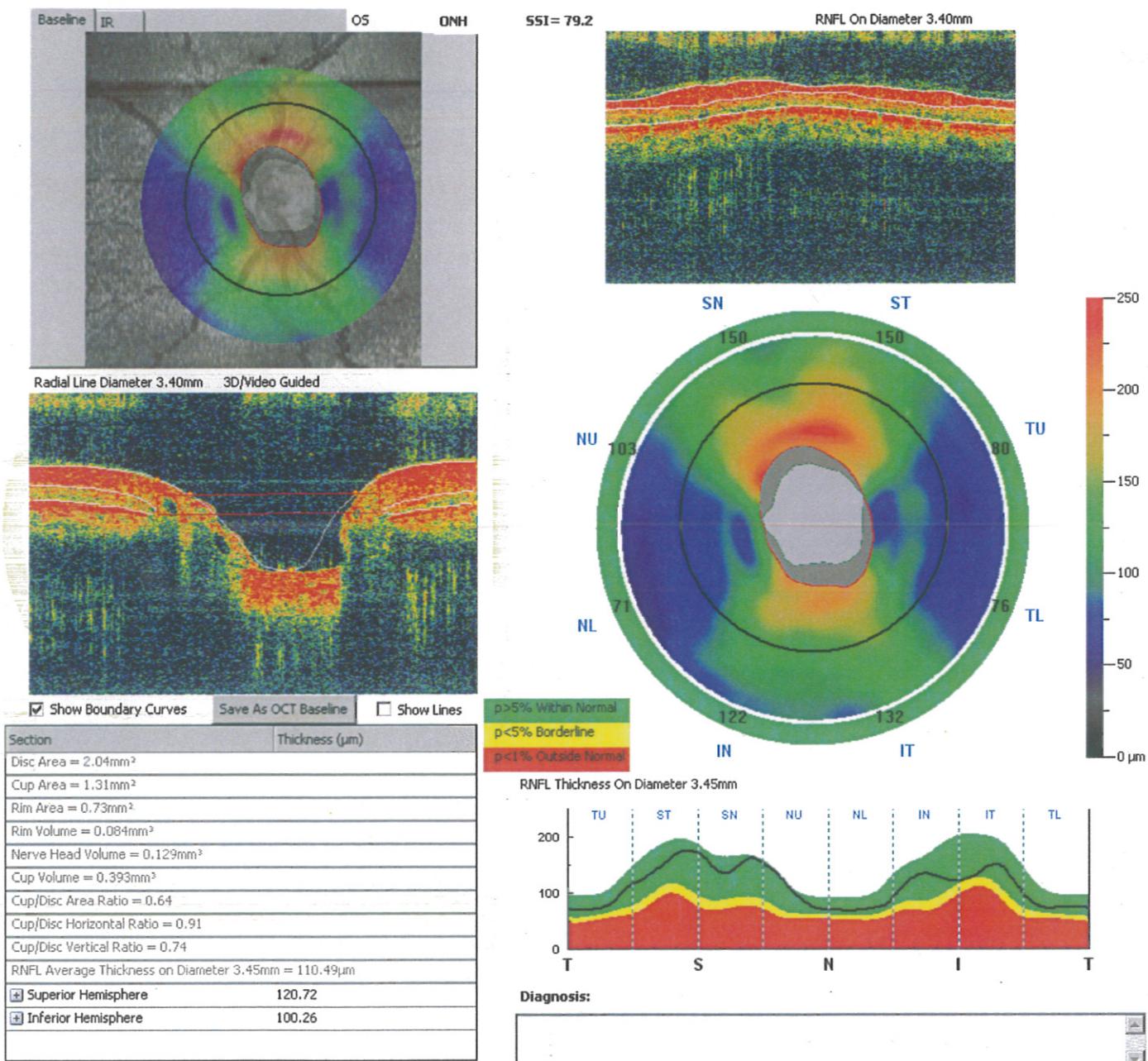
5th Lane, Hse. No F525/1 Osu . 0302783832

OS

Patient: ASANA, Esther
 Physician: ADAM, Y. S.
 Operator: Ahiabor, Edem K
 Disease:

Gender: F
 ID:

Exam Date: 19/09/2016
 DOB (age): 15/03/1974 (42)
 Ethnicity:
 Algorithm Version: A6, 1, 0, 4



Report Date: Monday September 19 14:25:24 2016

Report Date: Monday September 19 14:25:39 2016

Software Version #6, 1, 0, 4

Comments:

Signature:

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INTER-STAR EYE CLINIC

5th Lane, Hse. No F525/1 Osu . 0302783832

OS

Patient: ASANA, Esther
 Physician: ADAM, Y. S.
 Operator: Ahiabor, Edem K
 Disease:

Gender: F
 ID:

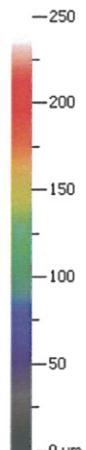
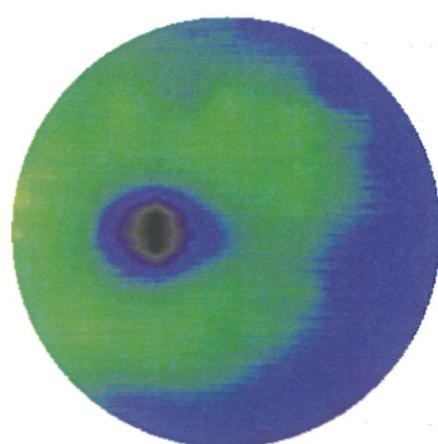
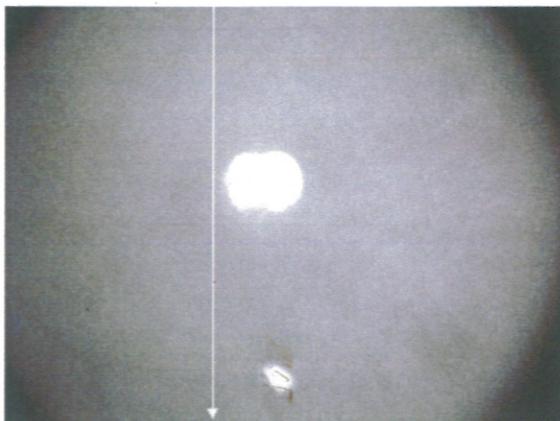
Exam Date: 19/09/2016
 DOB (age): 15/03/1974 (42)
 Ethnicity:
 Algorithm Version: A6, 1, 0, 4

OS

GCC

SSI = 77.3

Thickness Map

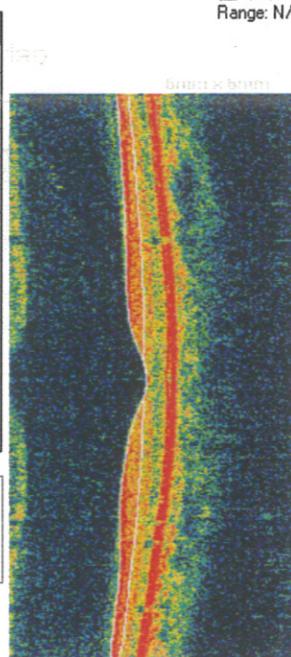


Section	Thickness	Std Dev
Average	97.42	± 11.87
Superior	101.83	
Inferior	93.02	
S-I	8.81	± 11.87
FLV (%)	1.447	
GLV (%)	3.302	

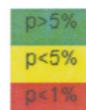
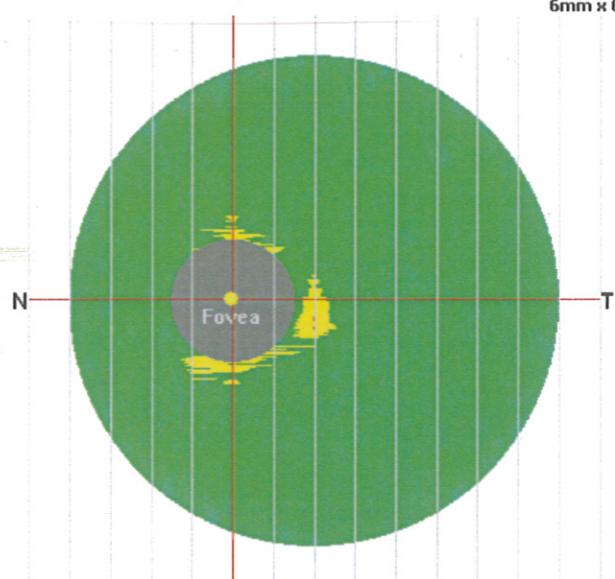
Show Lines
 Range: N/A

Thickness
 Full Retinal GCC Thickness
 GCC Deviation
 Outer Retinal Significance

Show Boundary Curves



Significance Map



Diagnosis:

Report Date: Monday September 19 14:25:41 2016

Report Date: Monday September 19 14:26:05 2016

Software Version #6, 1, 0, 4

Comments:

Signature:

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optovue

13457



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 <i>(9-9-16)</i>	R PRESCRIPTION GIVEN							
	Dist	Sph	Cyi	Axis	Prism	Sph	Cyi	Axis
P.D. <i>67mm</i>	<i>Plan</i>				<i>Plan</i>			
Inter								
Read	<i>+1.75</i>				<i>+1.75</i>			
HEIGHTS	MONO		BLANK		TECH SIG. CHECKED			
R L	R	L						
DISPENSING NOTES		DESCRIPTION				GH¢	P	
		FRAME						
		LENSES						
		COATING						
		SUNDRIES						
				TOTAL				
				VOUCHER				
				BALANCE				
				DEPOSIT				
				BALANCE				
PLEASE TICK	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
CASH	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
CHEQUE	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
CREDIT CARD	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
DISPENSED BY	CHECKED BY		RECEIVED BY		DATE			

SYMPTOMS & HISTORY	OCCUPATION Hobbies	
EXTERNAL EXAMINATION OPHTHALMOSCOPY	FIELD TONOMETRY COLOUR ETC.	
OPHTHALMOSCOPY	SUBJECTIVE	ACCOMMODATION
NPI 6/50s	6/R Plans 6/L Plans Binoc ADD	= 6/5 NPI R Rdg ADD 76fs = N
MUSCLE BALANCE	Add +1.75 Ds RETEST DATE 2nd Amend	
<u>Auto</u>	<u>R error</u> <u>L pres 1 - 0.75 x 180</u>	