

SURNAMES (Block Letters)

AMOAKO

FIRST NAMES

ALEXANDER

Sex

m

PHONE NUMBER.....

0243125133

ADDRESS OR RESIDENTIAL.....

GREATER ACCRA

OCCUPATION

RETIRED

MARITAL STATUS

MARRIED

DIVORCED

SINGLE

OTHER

✓

DATE OF BIRTH

18/1965

AGE

57

PLACE OF BIRTH

BRONG AHIAFO

ANY ALLEGIC REACTION
TO MEDICINE

NATIONALITY

GHANAIAN

RELIGION

CHRISTIAN

DATE OF FIRST ATTENDANCE

19/5/17

NEXT OF KIN

MR. AMOAKO

ADDRESS OR PHONE No. OF NEXT OF KIN

0270125132

9/5/17



INTERSTAR EYE CLINIC & LASER CENTRE

NAME: Amoako Alexander

CARD NUMBER: 16610

DATE: 19/5/17

% Blunt V 8m w RS for 3yrs

Dm. ϕ HPT. ϕ Tmme = ϕ

V_R 6/36w, blist

V_L 6/9w

Reaction - pupil - reaction

Tup
16 15

Cataract + lens
M₆ Cataract fulcr
4/10 5

clear

4/10 6

plan

OG T 79 /avg Rmk (1)
88

OC
(check)

(2) TRUSTAMODT

(3) R Tears q/w

(4) RS Ph6 + IR

(5) FBS, FBR

Sn 4/52

INTER STAR EYE CLINIC AND LASER CENTRE

OSU-ACCRA 233277755354

Patient: AMOAKO, ALEXANDER
Physician:
Operator: SEGLAH, GEOFFREY SELORM
Disease:

Gender: Male
ID: 16610

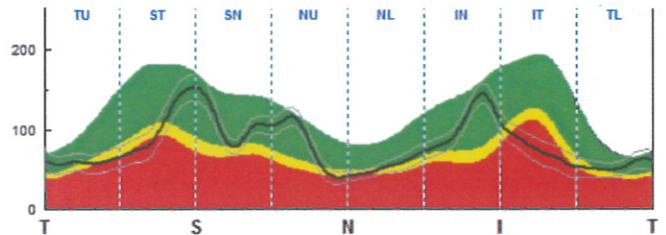
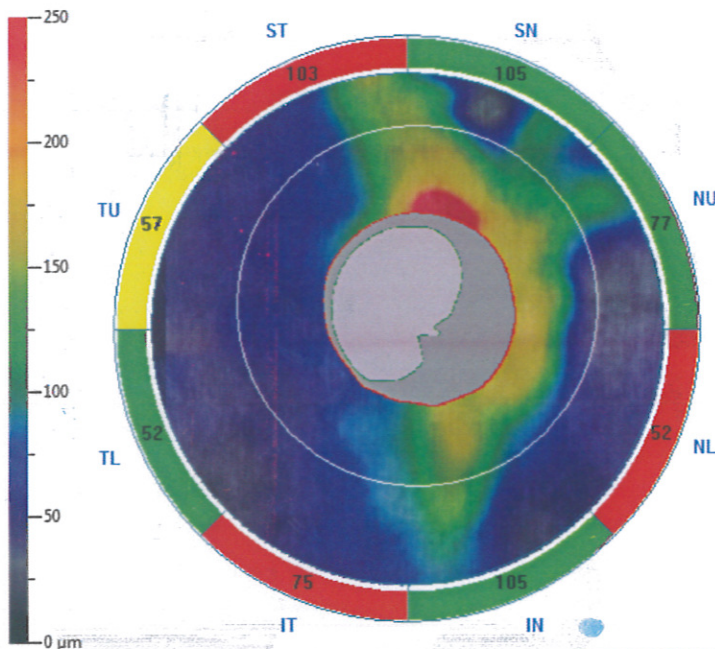
Exam Date: 05/19/2017
DOB(age): 08/02/1965 (51)
Ethnicity:
Algorithm Ver: Ai2016, 2, 0, 18

Nerve Fiber ONH

Scan Quality Index Poor: 26 ☐ View Reproducibility

Right / OD

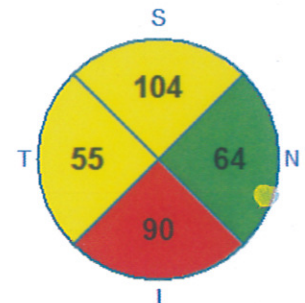
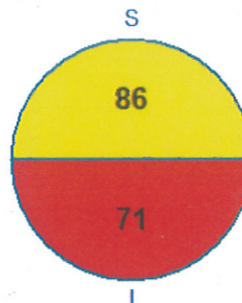
RNFL Thickness On Diameter 3.45mm



| RNFL Analysis | | μm | ONH Analysis | |
|---------------------|--|----|-------------------------------|-------|
| Avg RNFL Thickness | | 73 | Cup/Disc Area Ratio | 0.52 |
| Avg Superior RNFL | | 86 | Cup/Disc V. Ratio | 0.88 |
| Avg Inferior RNFL | | 71 | Cup/Disc H. Ratio | 0.71 |
| Superior - Inferior | | 15 | Rim Area (mm ²) | 1.29 |
| | | | Disc Area (mm ²) | 2.66 |
| | | | Cup Volume (mm ³) | 0.079 |

☐ Not in Trend Analysis

Within Normal
Borderline
Outside Normal



Report Date: Friday 05/19/2017 03:36:30

Software Version: 2016.2.0.18

Comment:

Signature:

Defining the OCT Revolution

optovue

INTER STAR EYE CLINIC AND LASER CENTRE

OSU-ACCRA 233277755354

Patient: AMOAKO, ALEXANDER
Physician:
Operator: SEGLAH, GEOFFREY SELORM
Disease:

Gender: Male
ID: 16610

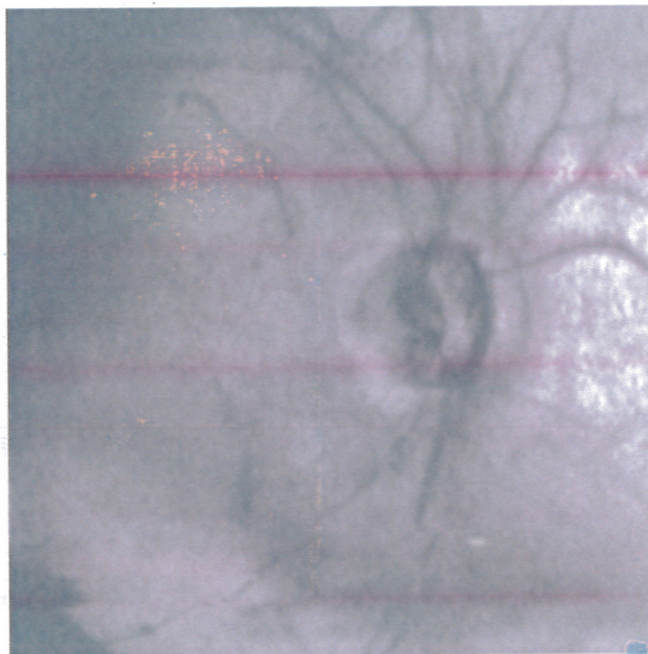
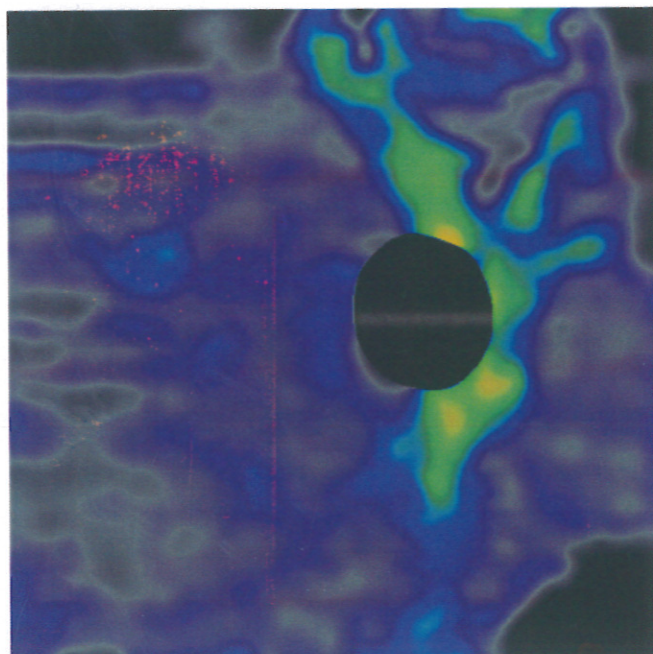
Exam Date: 05/19/2017
DOB(age): 08/02/1965 (51)
Ethnicity:
Algorithm Ver: Ai2016, 2, 0, 18

3D Fundus Enface

Scan Quality Index Poor 20

Right / OD

8.00 x 8.00 Scan Size (mm)



Report Date: Friday 05/19/2017 03:36:40

Software Version: 2016.2.0.18

Comment:

Signature:

Defining the OCT Revolution

optovue

INTER STAR EYE CLINIC AND LASER CENTRE

OSU-ACCRA 233277755354

Patient: AMOAKO, ALEXANDER
Physician:
Operator: SEGLAH, GEOFFREY SELORM
Disease:

Gender: Male
ID: 16610

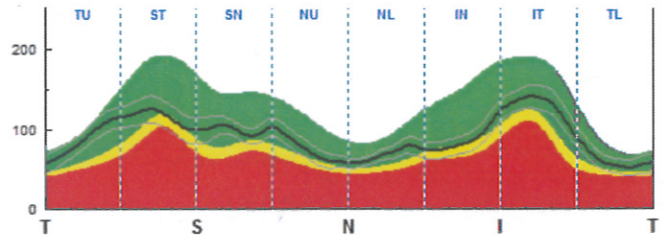
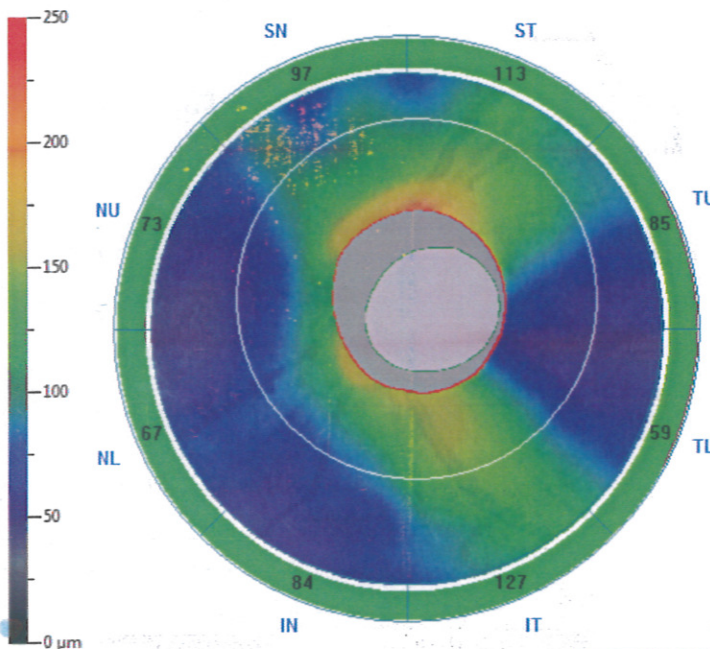
Exam Date: 05/19/2017
DOB(age): 08/02/1965 (51)
Ethnicity:
Algorithm Ver: Ai2016, 2, 0, 18

Nerve Fiber ONH

Scan Quality Index **Good 73** ☐ View Reproducibility

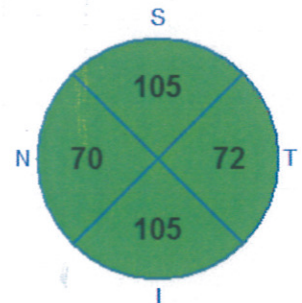
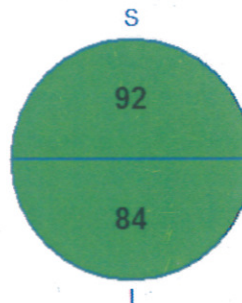
Left / OS

RNFL Thickness On Diameter 3.45mm



| RNFL Analysis | | μm | ONH Analysis | |
|---------------------|----|----|-------------------------------|-------|
| Avg RNFL Thickness | 88 | | Cup/Disc Area Ratio | 0.53 |
| Avg Superior RNFL | 92 | | Cup/Disc V. Ratio | 0.72 |
| Avg Inferior RNFL | 84 | | Cup/Disc H. Ratio | 0.80 |
| Superior - Inferior | 8 | | Rim Area (mm ²) | 1.06 |
| | | | Disc Area (mm ²) | 2.28 |
| | | | Cup Volume (mm ³) | 0.426 |

☐ Not in Trend Analysis



Report Date: Friday 05/19/2017 03:37:00

Software Version: 2016.2.0.18

Comment:

Signature:

Defining the OCT Revolution

optovue

INTER STAR EYE CLINIC AND LASER CENTRE

OSU-ACCRA 233277755354

Patient: AMOAKO, ALEXANDER
Physician:
Operator: SEGLAH, GEOFFREY SELORM
Disease:

Gender: Male
ID: 16610

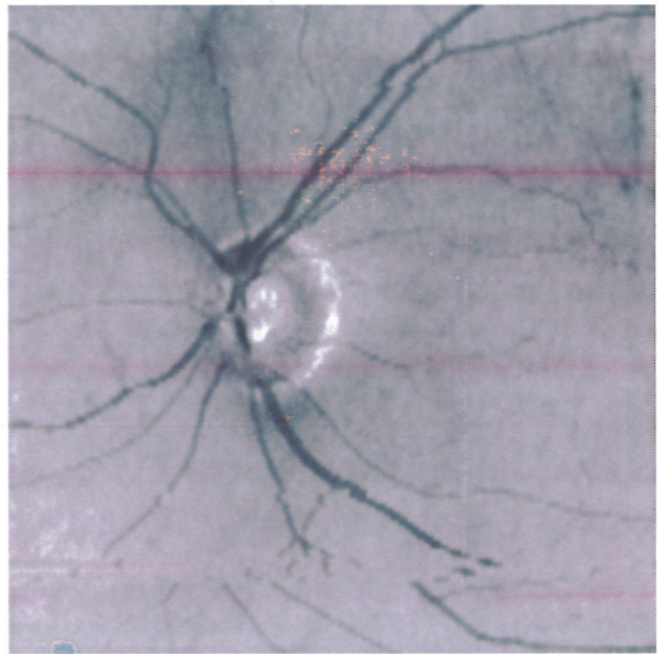
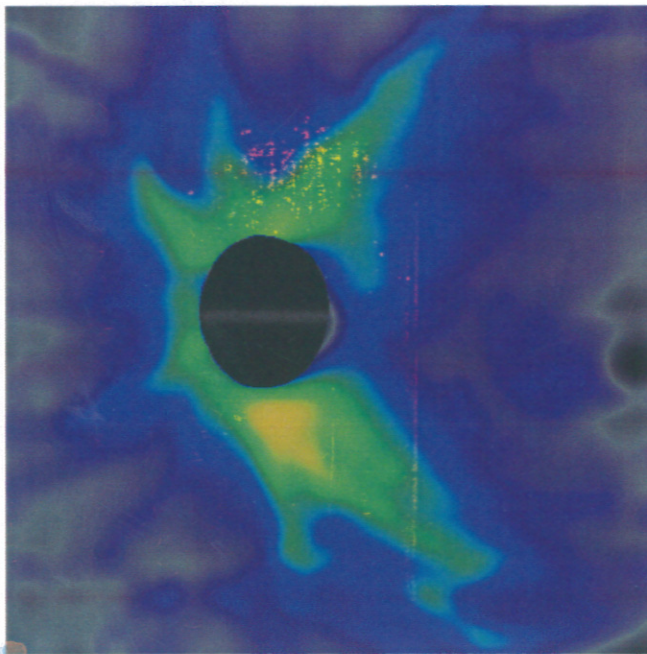
Exam Date: 05/19/2017
DOB(age): 08/02/1965 (51)
Ethnicity:
Algorithm Ver: Ai2016, 2, 0, 18

3D Fundus Enface

Scan Quality Index **Good 65**

Left / OS

8.00 x 8.00 Scan Size (mm)



Report Date: Friday 05/19/2017 03:37:11

Software Version: 2016.2.0.18

Comment:

Signature:

Defining the OCT Revolution

optovue



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 _____ PRESCRIPTION GIVEN

| | R | Sph | Cyl | Axis | Prism | Sph | Cyl | Axis | Prism |
|------|---|-------|-----|------|-------|-------|-----|------|-------|
| Dist | | +1.75 | | | | +0.75 | | | |

| P.D. | Inter | Read | | | | | | | |
|------|-------|-------|--|--|--|-------|--|--|--|
| 67mm | | +2.25 | | | | +2.25 | | | |

| 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
CASH ☐ CHEQUE ☐ CREDIT CARD ☐

| DISPENSED BY | CHECKED BY | RECEIVED BY | DATE |
|--------------|------------|-------------|------|
|--------------|------------|-------------|------|

| | | | |
|---|---|---|------|
| SYMPTOMS & HISTORY | | OCCUPATION HUBBIES | |
| EXTERNAL EXAMINATION OPHTHALMOSCOPY | | FIELD TONOMETRY COLOUR ETC. | |
| OPHTHALMOSCOPY | SUBJECTIVE | ACCOMMODATION | |
| 6/30m 6/9m | 6/R +1.75 DS 6/L +0.75 DS Binoc ADD | = 6/24 R = 6/5 L Rdg ADD = N 5 | 76/5 |
| MUSCLE BALANCE | | RETEST DATE | |
| Auto R +0.25 L +1.50/-0.25 x 33 Add +2.25 DS | | Jc | |