

URNAMES (Block Letters)
OYAN

FIRST NAMES
MARY

Sex
FEMALE

PHONE NUMBER... 0276688601

ADDRESS OR RESIDENTIAL... P.O. BOX CT 84 CANTOMENT ACCRA.

OCCUPATION
PROPRIETRESS

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

DATE OF BIRTH
07/1960

AGE
56

PLACE OF BIRTH
DOMINASE

ANY ALLEGIC REACTION
TO MEDICINE

NATIONALITY
ANAMAN

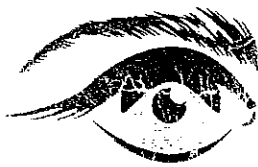
RELIGION
CHRISTIAN

DATE OF FIRST ATTENDANCE
8th SEPTEMBER 2016

NEXT OF KIN
BIBIE CRENTSIL

ADDRESS OR PHONE No. OF NEXT OF KIN
0277480409

1090 / 2



INTER-STAR EYE CLINIC & LASER CENTRE

NAME: Mrs Mary Boyan

CARD NUMBER: 13346

DATE: 08-09-16

1/2 Growth in BB for <1yr. R7L.
occasional itching and pain. cloudy vision.
in BB.

DM⁺, HPT⁺

VR 6/12m, 6/9pt R 6/12m, 6/9pt

(2) Any - mass atretum

TOP

16 44

Sclerotic - lens - Corneal
contact

c/104 - fulus - c/104

(1) Re-^{pt} Warm Tears

End
BE

81 2/2

(2) RE: Hayden etc

13346



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			
8-9-16	Dist	+0.75	-1.00	160		+0.50	-0.75	120				
P.D.	Inter											
	Read	+2.50				+2.50						
HEIGHTS		MONO		BLANK		TECH SIG. CHECKED						
R	L	R	L									
DISPENSING NOTES		FRAME				DESCRIPTION		GH¢ P				
						OWN		-				
		LENSES				UV b1f		150.00				
		COATING										
		SUNDRIES										
PLEASE TICK CASH <input type="checkbox"/> CHEQUE <input type="checkbox"/> CREDIT CARD <input type="checkbox"/>		TOTAL				GH¢ 150.00						
		VOUCHER				paid 24/2/17						
		BALANCE				100.00						
		DEPOSIT				50.00 paid						
		BALANCE				8/9/16						
DISPENSED BY		CHECKED BY		RECEIVED BY		DATE		24/2/17				

SYMPTOMS & HISTORY		OCCUPATION HOBBIES	
EXTERNAL EXAMINATION OPHTHALMOSCOPY		FIELD TONOMÉTRY COLOUR ETC.	
OPHTHALMOSCOPY	SUBJECTIVE		ACCOMMODATION
6/12m 6/12m	6/R to $0.75/-1.50 \times 160$ = 6/9 6/L to $0.50/-0.75 \times 120$ = 6/9 Binoc ADD		R L Rdg ADD 76/9 = N
MUSCLE BALANCE			RETEST DATE
Auto Add +2.50 DS R +2.75/-3.25 x 157 L to 0.75/-1.00 x 126			Jy.