

SURNAMES (Block Letters)

DARKWAH

FIRST NAMES

STEPHEN

Sex

M

PHONE NUMBER.....

0550467662

ADDRESS OR RESIDENTIAL.....

AKYEM-ABODOM

OCCUPATION

FARMER

MARITAL STATUS

MARRIED

DIVORCED

SINGLE

OTHER

✓

DATE OF BIRTH

AGE

16/7/1986

42

PLACE OF BIRTH

AKYEM-ABODOM

ANY ALLEGIC REACTION  
TO MEDICINE

N/A

NATIONALITY

GHANAIAN

RELIGION

CHRISTIAN

DATE OF FIRST ATTENDANCE

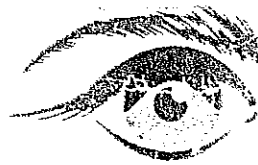
2/7/19

NEXT OF KIN

AMA KUMIWAA

ADDRESS OR PHONE No. OF NEXT OF KIN

0248089489



# INTER-STAR EYE CLINIC & LASER CENTRE

NAME: Darkwah Stephen

CARD NUMBER: 23964

DATE: 2/7/19

Ch: Cant see well in BE (L > R), pains in BE, was slapped on the LE x 1/2, has been receiving treatment at Akwanta Hospital, to seek another opinion. Glast ~~on~~ mount phak. for Asth, drugtx: Eye drop. [??]

Un: 6/24<sub>un</sub>  
ph: 6/12

6/15<sub>un</sub>

MCT  
15 14  
AT < 10  
10

RE

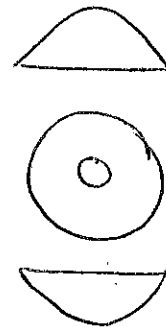
(2)

(2)

LE

flare +

Fundus



mild cong  
congestion  
? RAPD

(2)

LE - 1 traumatic  
iritis

glasses - later

Adv

Flarex eyedrop (LE)  
4 times/day x 2 weeks

Refresh tears eld (LE)  
4 times/day

Review in 2 weeks

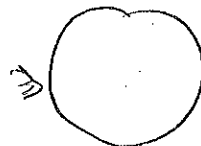
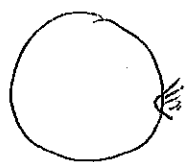
6-27-19 2 for review - Better now  
using R-Tears

VR: 6/18m

VL: 6/9m

sem

O/E



Quiet

NCT

A  
14 15

Pl. 1. Rx pure glass

2. full defn tears only - R

3. See 4/12

PK

13-08-19

%:- Pains in Both eyes since 1/52. Tear<sup>+</sup> (B.E)  
Headache<sup>+</sup>. still on refresh tears.

VR:- 6/6gl

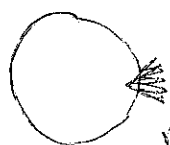
VL:- 6/6gl

NG<sup>-</sup>  
15 15

sem

Comfortable with glasses  
redness, discharge, photophobia<sup>+</sup>

O/E:



pinguicula



pinguicula

Pl. 1. full time - new only

2. full defn tears only

R

4/52

PK

NE pinguicula  
excess - CTR



# 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

16-07-19

R

PRESCRIPTION GIVEN

	Sph	Cyl	Axis	Prism	Sph	Cyl	Axis	Prism
Dist	Plan	+1.50	70		+1.50	-0.75	90	
Inter								
Read	+1.75				+1.75			

P.D.

6mm

HEIGHTS

R L

MONO

R

L

BLANK

TECH SIG.  
CHECKED

DISPENSING NOTES

FRAME

DESCRIPTION

GH¢ P

Suprimo

200.00

LENSES

photo AIR b/f

320.00

COATING

SUNDRIES

TOTAL

520.00

VOUCHER

paid 31/7/19

BALANCE

270.00

DEPOSIT

250.00

BALANCE

paid 16/7/19

PLEASE TICK

CASH ☐

CHEQUE ☐

CREDIT CARD ☐

DISPENSED BY

CHECKED BY

RECEIVED BY

DATE

31/7/19

SYMPTOMS & HISTORY	OCCUPATION HUBBIES
--------------------	-----------------------

EXTERNAL EXAMINATION OPHTHALMOSCOPY	FIELD TONOMETRY COLOUR ETC.
-------------------------------------	-----------------------------

OPHTHALMOSCOPY	SUBJECTIVE	ACCOMMODATION
6/18 m	6/R Planx / -1.50 x 70 = 6/5 R	L
6/9 m	6/L to -50 / -0.75 x 90 = 6/5 Binoc ADD	<del>Binoc ADD</del> <del>6/8</del> = N

MUSCLE BALANCE	RETEST DATE
Auto R Planx / -1.25 x 74  L +1.25 / -1.25 x 87	Add +5.75 DS → JJ JJ



# 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
2/7/19	Dist	PC	-1.75	90		+0.50	-0.75	90	
P.D. 63mm	Inter								
	Read	+1.75				+1.75			

HEIGHTS		MONO		BLANK	TECH SIG. CHECKED
R	L	R	L		

DISPENSING NOTES	FRAME	DESCRIPTION	GH¢	P
	LENSES			
	COATING			
	SUNDRIES			
TOTAL VOUCHER BALANCE DEPOSIT BALANCE				
DISPENSED BY		CHECKED BY	RECEIVED BY	DATE

PLEASE TICK

CASH ☐

CHEQUE ☐

CREDIT CARD ☐

SYMPTOMS & HISTORY		OCCUPATION HUBBIES	
EXTERNAL EXAMINATION OPHTHALMOSCOPY		FIELD TONOMETRY COLOUR ETC.	
OPHTHALMOSCOPY	SUBJECTIVE		ACCOMMODATION
6/24 <sup>-</sup> 6/19 <sup>+</sup> <sub>ua</sub>	6/R: PL $-1.75 \times 90 = 6/6$ 6/L: $+0.50 - 0.75 \times 90 = 6/6$ Binoc ADD		R Rdg ADD $7/6$ L $= N$
MUSCLE BALANCE		RETEST DATE	
Auto R $\rightarrow +0.25 / -1.50 \times 79$ L $\rightarrow +2.00 / -1.80 \times 114$		ADD: H. 750-J2	