

Medical Report

Patient Details

Patient ID : 200033334444
Patient Name : James Oliver
Date of Birth : 01/01/2000
Gender : Male
Phone Number : 234243534



Eye Exam Details

	Right Eye Diagnosis	Left Eye Diagnosis
Lids	test	test
Conjuitive	null	null
AC	test	test
Iris	test	test
Vitereous	test	test
Cornea	test	test
Retina	test	test

Allergies: Allergies information
Medical History: Medical history information

Surgery Details

Surgery Id : SG-00000-200033334444
Date : 16/05/2024
Time : 17:00:00
Doctor Id : MBBS.00000
Lens Id : BL-2024-0000
Description :

Doctor In Charge
Dr. John Doe

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