

# Medical Report

## Patient Details

Patient ID: 123456789v  
Patient Name: John Doe  
Date of Birth: 15/05/1990  
Gender: male  
Phone Number: 1234567890



## Eye Exams Details

	Right Eye Diagnosis	Left Eye Diagnosis
Lids	Swollen	Normal
Conjunctive	Reddish	Clear
AC	Inflamed	Normal
Iris	Green	Brown
Vitereous	Cloudy	Clear
Cornea	Scarred	Normal
Retina	Detached	Healthy

Allergies: None

Medical History: No significant medical history

## Surgery Details

Surgery Id: SG-00000-123456789v

Date: 12/01/2024

Time: 10:15:00

Doctor Id: MBBS.00000

Lens Id: AB-2022-1459

description: test