# **Chennai Hospital**

# **EyeScreenService**

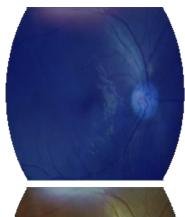
Diabetic Retinopathy Screening Report

Patient Information	General Information
Patient ID	Referring Location:
Patient Name:	Referring Provider:
Date of Birth:	Encounter ID:
Gender:	Eyenuk Control ID:
Submission Date:	Dilation Status:

# **Diabetic Retinopathy Screening Summary**

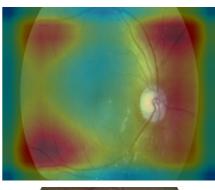
**Screening Result:** 

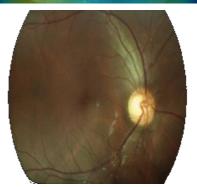
### **Right Eye:**





#### Left Eye:





<sup>\*</sup>Do not use the above thumbnail images for diagnostic purposes.

## **ICD-10 Diagnosis Codes**

: Type

Type

## **Plan and Recommendations**

As per ADA recommendations, emphasize the importance of controlling blood sugar, cholesterol and bloodpressure as well the importance of routine follow-up with an ophthalmologist regardless of whether visualsymptoms are present or absent.

## **Additional Comments**

Left Eye: None Right Eye: None

Digitally signed by

Report Date: