

E.	Duration of the present ailment:	
i.	Date of First consultation:	16/05/2024
ii.	Past history of present ailment, if any:	
F.	Provisional diagnosis:	EDOF Foreign lens cataract RE
i.	ICD 10 code:	
G.	Proposed line of treatment:	
i.	Medical Management	( <input type="checkbox"/> )
ii.	Surgical Management	( <input checked="" type="checkbox"/> )
iii.	Intensive Care	( <input type="checkbox"/> )
iv.	Investigation	( <input type="checkbox"/> )
v.	Non allopathic treatment	( <input type="checkbox"/> )
H.	If investigation and/ or Medical M:	SURGICAL
i.	Route of Drug Administration:	
I.	If surgical, name of surgery:	RE MICS WITH PCIOLE UNDER TA
i.	ICD 10 PCS code:	
J.	If other treatment, provide details:	na
K.	How did injury occur?	