

JOJO HOSPITAL - MEDICAL REPORT

SECTION 1: PATIENT’S PARTICULARS

Full name of patient	Nguyen Thi Hoa
NRIC/Passport no.	591028-08-7704
Age of patient	66 years old
Gender	Female
Blood type	A-
Allergies	Aspirin

SECTION 2: DOCTOR’S PARTICULARS

Full name of doctor	Dr. Rajesh Kumar
MCR no. of doctor	JH445566
Hospital / Clinic	Jojo Hospital, 88 Wellness Road, Kuala Lumpur
Doctor’s qualifications and experience	MBBS (India), MRCP (UK), Cardiologist with 12 years’ experience.
Doctor-patient relationship	Patient under care with regular follow-ups. Examined on 11 October 2024 for this report.

SECTION 3: PATIENT’S MEDICAL INFORMATION

Current complaints	Blurred vision and eye discomfort.
Clinical history	History consistent with Glaucoma, Diabetic Retinopathy. Patient has experienced symptoms such as blurred vision and eye discomfort. and requires ongoing treatment and monitoring.
Findings from physical/mental state examination	Examination findings support the diagnosis of Glaucoma, Diabetic Retinopathy. Physical signs and clinical tests align with the reported complaints.
Relevant investigation results	Diagnostic imaging and laboratory results reveal abnormalities consistent with Glaucoma, Diabetic Retinopathy.
Diagnosis	1. Glaucoma 2. Diabetic Retinopathy

SECTION 4: OPINION ON PATIENT’S MENTAL CAPACITY

Personal Welfare	Patient's welfare considerations are dependent on the clinical condition described. Support from caregivers is recommended.
Property & Affairs	Patient may require support in handling financial and property-related matters depending on the severity of illness.
Basis of opinion	Opinion is based on correlation between symptoms, clinical findings, and diagnosis. Condition affects the patient's independence.
Prognosis	Glaucoma is typically chronic and requires long-term management. Overall prognosis depends on treatment compliance and disease progression.

SECTION 5: DECLARATION

Declaration	I confirm that this report is true to the best of my knowledge and belief. I understand my duty is to the Court and I have complied with that duty.
Signature	_____
Name	Dr. Rajesh Kumar
Date	11 October 2024