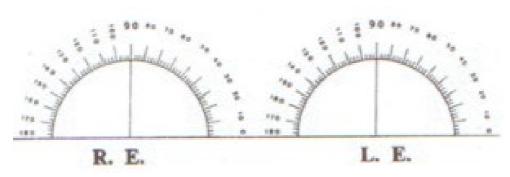
Final Prescription Glasses								
Patient Name	: Reshm	Reshma Siya			Emirates ID :		784-6478-3648736-8	
File No	: 4	DOB	:	1995-05-21	Nationality	:	Other	
Gender	: Female	Doctor's Name	:	Opthalmology Doctor	Date	:	2024-02-28	

عيادة العيون EYE CLINIC

نظارات



R						L					
Shp	Cyl	Axis	Visual Acuity			Shp	Cyl	Axis	Visual Acuity		
				Dist	ance						
				N€	ear						
ADD:						ADD:					
DEC :						DEC:					
FORM:						TINT:					
TYPE OF LENS :											
SEG DETAILS :						IPD : mm					
LENS SIZE : LENS SHAPE :				DISTANCE CENTRES : NEAR CENTRES			ES:				
Please bring this card for the next Visit					يرجى إحضار هذه البطاقة للزيارة القادمة						
Remarks :											

Sign here, only if all of your questions have been answered to your satisfaction					
Patient	Doctor				

Patient Name Reshma Siya

Date 2024-02-28 Doctor Name Opthalmology Doctor - Ophthalmology (Oph45)

> Date 2024-02-28

