Discharge Summary For Ultralasik Treatment Procedure Patient Name sai krishna **Emirates ID** 784-8666-666666-7 File No DOB 1996-09-25 Nationality Other Doctor's Name 2024-02-27 Gender Male Opthalmology Doctor Date

Patient Name:sai krishna

Medical Record Number: SEC8

Admission Date:2/27/2024 12:00:00 AM Discharge Date:2/27/2024 12:00:00 AM

Ophthalmic surgeon: DR.
Primary Care Physician DR:

Condition on Discharge: STABLE, COHERENT AND CONSCIOUS PATIENT

Final Diagnosis:

Procedures: UltraLASIK treatment procedure (RIGHT/LEFT EYE)

Discharge Medications: PREDFORTE EYE DROPS & OFLOX EYEDROPS HOURLY ON THE DAY OF SURGERY THEN 5X/DAY FOR 1 WEEK FOR THE NEXT DAY ARTELAC ADVANCED EYEDROPS QID+PRN BENOXINATE EYEDROPS FOR PAIN/PRN

Follow up Appointments. Please come after next day.

Sign here, only if all of your questions have been answered to your satisfaction		
Patient	witness	Doctor
Patient Name sai krishna	Witness Name gdfgdfggf	Doctor's Name Opthalmology Doctor
Date 2024-02-27	Date 2024-02-27	Date 2024-02-27

