

# ચારુસેટ હોસ્પિટલ, ચાંગા

વર્લ્ડ ક્લાસ મલ્ટી સ્પેશિયાલિટી હોસ્પિટલ

Body Profile

તારીખ / Date

8/3/24

રજીસ્ટ્રેશન નંબર / Registration Number

CH-2024-0054210

દર્દીનું નામ / Patient's Name

Rohan Sharma R

સંપર્ક નંબર / Contact Number

હેલ્થ લાઇન

એપોઇન્ટમેન્ટ માટે સંપર્ક

+91-2697-265502/504

+91-95379 27873

૨૪ કલાક ઇમરજન્સી સંપર્ક

+91-2697-265500

+91-75748 38111

નોંધ : ફટી બતાવવા આવો ત્યારે આ ફાઇલ અચૂક સાથે લાવવી.

# ચાર્ટર્ડ હોસ્પિટલમાં ઉપલબ્ધ સેવાઓ

- મેડિસીન
- જનરલ સર્જરી
- ઓર્થોપેડીક
- માનસિક રોગ

- સ્ત્રીરોગ
- ચામડીના રોગ
- નવજાત શિશુ તથા બાળરોગ
- ફિઝિયોથેરાપી

- નાક-કાન-ગળાના રોગ
- દંત ચિકિત્સા
- આંખના રોગ
- નેફ્રોલોજી (કિડની સંબંધિત સેવા)

## ડાયગ્નોસ્ટિક

- પેથોલોજી લેબોરેટરી

- ટ્રેક મીલ ટેસ્ટ

- ઈન્ડો કાર્ડિયોગ્રાફી

## રેડિયો ડાયગ્નોસ્ટિક

- ડિજિટલ એક્સ-રે

- સોનોગ્રાફી

- સીટી સ્કેન (3૨ સ્લાઈસ)

## સ્પેશિયલ ક્લિનિક

- ડેન્ટલ ક્લિનિક
- ડાયાબિટીસ ક્લિનિક

- વંધ્યત્વ નિવારણ ક્લિનિક (ઈન્ફર્ટીલીટી)
- મેનોપોઝ ક્લિનિક

- એન્ટીબાયોટિક ક્લિનિક
- વેલ પુમન ક્લિનિક

## ઉચ્ચતમ સેવાઓ

- લેપ્રોસ્કોપીક સર્જરી
- યુરોલોજી

- જોઈન્ટ રીપ્લેસમેન્ટ સર્જરી
- સ્પાઈન સર્જરી

- ડેન્ટલ ઈમ્પ્લાન્ટ

## અદ્યતન સેવાઓ

- જનરલ વોર્ડ
- ડીલક્ષ વોર્ડ
- સ્થુટ રૂમ

- સ્પેશિયલ રૂમ
- પાંચ આધુનિક ઓપરેશન થિયેટર
- આઈ.સી.યુ./એન.આઈ.સી.યુ.

- કિલીવરી સ્યુટ
- એમ્બ્યુલન્સ
- બ્લડ સેન્ટર

## પ્રીવેન્ટીવ હેલ્થ ચેકઅપ

- વિવિધ હેલ્થ ચેકઅપ પ્લાન ઉપલબ્ધ

## કૌશલેશ સંકલિત સુવિધાઓ

- આયુષ્યમાન ભારત યોજના અંતર્ગત મફત સેવા
- શ્રી સરદાર પટેલ આરોગ્ય મંડળ  
(અમૂલ સંચાલિત દૂધ મંડળીના સભાસદો માટે)
- કર્મચારી રાજ્ય બીમા નિગમ (ESIS)
- ગુજરાત રાજ્ય એસ.ટી નિગમ (ફક્ત કર્મચારી માટે)


- એમ.ડી. ઈન્ડિયા હેલ્થકેર સર્વિસ
- મેક્સ બુપા હેલ્થ ઈન્સ્યોરન્સ
- બાજાજ એલ્યાન્સ જનરલ ઈન્સ્યોરન્સ
- HDFC ERGO
- રેલિગેર હેલ્થ ઈન્સ્યોરન્સ
- સ્ટાર હેલ્થ એન્ડ એલાઈડ ઈન્સ્યોરન્સ

અન્ય વિમા કંપનીઓની ફાઈલ તૈયાર કરી આપવામાં આવશે.



# CHARUSAT HOSPITAL




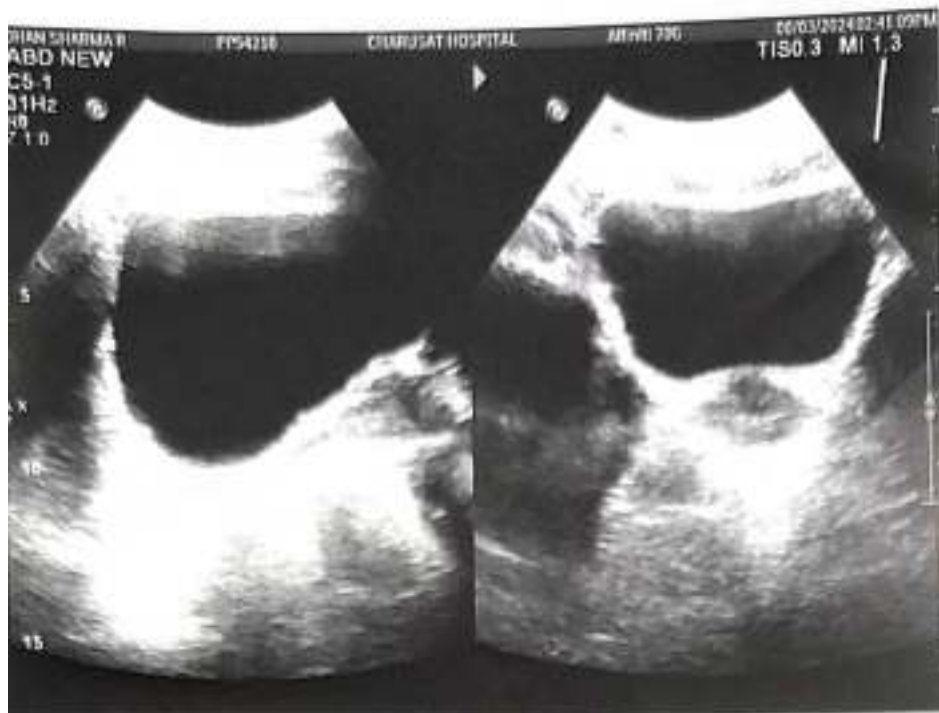
Patient Name : ROHAN SHARMA R	Sample No. : SAMPLE-0107728 
Patient ID : CH-2024-0054210	Visit No. : OPD/2024/03/0000404
Age/Sex : 29y/Male	Call. Date : 08-Mar-2024 09:01
Referred By : RIPAL PATEL	S. Coll. Date : 08-Mar-2024 14:37
Ward : -	Report Date : 08-Mar-2024 14:37

## PP2BS

Investigation	Result	Normal Value
Post Prandial Blood Sugar (2Hrs) :	133.6 mg/dl [NORMAL]	100 - 140

DR. NAITIK BHATIA  
CONSULTANT PATHOLOGIST  
(M.B.B.S.,D.C.P)

  
DR. KETAN KAPADIA  
CONSULTANT PATHOLOGIST  
(M.B.B.S.,M.D)



DATE	PATIENT NAME	SEX	REFERRED BY DR	INVESTIGATION
08-03-2024	ROHAN SHARMA R	M	BODY PROFILE	UM-TOTAL ABDOMEN USG

USG ABDOMEN report.

Liver: show evidence of normal size, parenchymal echotexture & no evidence of focal solid or cystic mass lesion seen. Normal hepatic vasculature seen with no evidence of intrahepatic biliary dilatation seen.

Gall bladder: contracted with no obvious evidence of calculus or sludge. Thickness of gall bladder wall is normal with no evidence of pericholecystic fluid collection. CBD, portal vein & splenic vein size are normal.

Spleen: size & parenchymal echotexture is normal with no focal mass lesion seen.

Pancreas: difficult to visualize due to overlying bowels.

Aorta: show normal caliber & no evidence of paraaortic mass lesion seen.

Right kidney: show evidence of normal size, position, corticomedullary differentiation & parenchymal echotexture. No evidence of obvious calcification or hydronephrosis seen. No evidence of focal solid or cystic mass lesion seen.

Left kidney: show evidence of normal size, position, corticomedullary differentiation & parenchymal echotexture. No evidence of obvious calcification or hydronephrosis seen. No evidence of focal solid or cystic mass lesion seen.

Bladder: walls are normal & no evidence of stone or mass seen.

Prostate: show evidence of normal size & parenchymal echotexture. No evidence of ascitis or abnormal bowel loops seen.

Size cm app

Right	Left
Kidney	Kidney
8.87x3.44	8.98x3.67

### COMMENTS:

No abnormality detected.



Thanks for reference  
DR PARUL C. DHANEKAR  
M.B.B.S, D.M.R.D



# CHARUSAT HOSPITAL



DATE	PATIENT NAME	SEX	REFERRED BY DR	INVESTIGATION
08-03-2024	ROHAN SHARMA R	M	BODY PROFILE	X-RAY

## X-ray CHEST PA view.

No evidence of consolidation or infiltration seen involving both lungs.

Costophrenic sinuses are clear.

Vascular shadows are normal on both sides.

Hilar shadows show evidence of normal size, position & opacity.


Heart & aortic shadows show evidence of normal position & size.

Position of domes of diaphragm is normal. Bony cage show no abnormality.

### COMMENTS:

NO EVIDENCE OF ABNORMALITY DETECTED.

Thanks for reference  
DR KIRTI C THAKKAR  
M.B.B.S, D.M.R.D

Patient Name : ROHAN SHARMA R	Sample No. : SAMPLE-0107716 
Patient ID : CH-2024-0054210	Visit No. : OPD/2024/03/0000404
Age/Sex : 29y/Male	Call. Date : 08-Mar-2024 09:01
Referred By : RIPAL PATEL	S. Coll. Date : 08-Mar-2024 09:52
Ward : -	Report Date : 08-Mar-2024 11:15

### Hemoglobin (HB)

Investigation	Result	Normal Value
Hemoglobin	14.2 gm/dl [NORMAL]	[M : 14-18, F : 12-16]

### WBC

Investigation	Result	Normal Value
R.B.C Count :	4.15 mill./c.mm [LOW]	[M : 4.5 - 5.5 , F : 3.8 - 5.2]

WBC :	9310 /c.mm [NORMAL]	4000 - 10000
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### Platelet count

Investigation	Result	Normal Value
Platelets	3.04 Lakh/cmm [NORMAL]	1.5 - 4.5


### WBC count - Differential

Investigation	Result	Normal Value
Polymorphs	70 % [NORMAL]	40 - 70
Lymphocytes	19 % [LOW]	20 - 40
Eosinophils	02 % [NORMAL]	1 - 6
Monocytes	09 % [NORMAL]	2 - 10
Basophils	00 % [NORMAL]	0 - 1

### BLOOD UREA

Investigation	Result	Normal Value
Blood Urea	31.1 mg/dl [NORMAL]	15 - 40

### S.Creatinine

Patient Name : ROHAN SHARMA R	Sample No. : SAMPLE-0107716 
Patient ID : CH-2024-0054210	Visit No. : OPD/2024/03/0000404
Age/Sex : 29y/Male	Call. Date : 08-Mar-2024 09:01
Referred By : RIPAL PATEL	S. Coll. Date : 08-Mar-2024 09:52
Ward : -	Report Date : 08-Mar-2024 11:15

Investigation	Result	Normal Value
Serum Creatinine	0.79 mg/dl [LOW]	Male : 0.9 to 1.5 mg/dl Female : 0.8 to 1.2 mg/dl

### BUN

Investigation	Result	Normal Value
BUN :	15 [NORMAL]	8.0 to 23.0 (mg/dl)

### URIC ACID

Investigation	Result	Normal Value
Serum Uric Acid	7.0 mg/dl [NORMAL]	Male : 2.5 to 7.0 Female : 1.5 to 6.0

### ESR

Investigation	Result	Normal Value
ESR - After One Hour	04 mm [NORMAL]	[M : 3 - 5, F : 4 - 7]

### Blood Group

Investigation	Result	Normal Value
ABO :	O	
Rh :	Positive	


### FASTING BLOOD GLUCOSE

Investigation	Result	Normal Value
Fasting Blood Sugar :	89.2 mg/dl [NORMAL]	70 - 110

### HBA1C

Investigation	Result	Normal Value
Mean Blood Glucose	122.6 mg/dl	



Patient Name : ROHAN SHARMA R	Sample No. : SAMPLE-0107716 
Patient ID : CH-2024-0054210	Visit No. : OPD/2024/03/0000404
Age/Sex : 29y/Male	Call. Date : 08-Mar-2024 09:01
Referred By : RIPAL PATEL	S. Coll. Date : 08-Mar-2024 09:52
Ward : -	Report Date : 08-Mar-2024 11:15

Hb A 1c

5.9 %

> 8 : Action Suggested  
7-8 : Good Control  
< 7 : Goal  
6-7 : Near Normal Glycemia  
< 6 : Non-diabetic Level

Comments

Hb A1C also know as Glycosylated Haemoglobin is the most important test for the assessment of longterm Blood glucose control (also called glycemic control).  
Hb A1C reflects mean glucose concentration over past 09-8 week and provides a much better indications of longterm glycemic control than blood glucose determination.  
This Reaction is irreverible & therefore remains unaffected glucose & Haemoglobin. Long term complications of diabetes such as Retinopathy (Eye-complications), nephropathy(Kidney-complications) & neuropathy(never complications) are potentially serious and can lead to blindness, kidney failure etc. Glycemic control as monitored by Hb A1C measurement is considered most important.

TSH

Investigation	Result	Normal Value
TSH :	<u>2.73</u> uIU/ml [NORMAL]	0.34 to 4.5 (uIU/ml)

T3


Investigation	Result	Normal Value
T3-Triiodothyronine :	<u>1.49</u> ng/ml [NORMAL]	0.69 to 2.15 (ng/ml)

T4

Investigation	Result	Normal Value
T4-thyroxine :	<u>88.1</u> ng/ml [NORMAL]	52.0 to 127.0 (ng/mL)

LIPID PROFILE


Investigation	Result	Normal Value
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Patient Name : ROHAN SHARMA R	Sample No. : SAMPLE-0107716 
Patient ID : CH-2024-0054210	Visit No. : OPD/2024/03/0000404
Age/Sex : 29y/Male	Call. Date : 08-Mar-2024 09:01
Referred By : RIPAL PATEL	S. Coll. Date : 08-Mar-2024 09:52
Ward : -	Report Date : 08-Mar-2024 11:15

Serum Cholesterol (Chol) :	174.0 mg/dl	<200 mg/dl Desirable 200-239 mg/dl Boderline High > 240 mg/dl High
Serum Triglyceride :	107.2 mg/dl	<150 mg/dl Normal 150-199 mg/dl Boderline High 200-499 mg/dl High
S.HDL Cholesterol :	43.0 mg/dl	Men : >55, Wo : >65 Standread Risk Level Men : 35-55, Wo : 46-65 Risk Men : <35, Wo : <45
LDLC :	96.2 mg/dl	
VLDL :	34.8 mg/dl [HIGH]	10.0 to 30.0 (mg/dl)
LDL/HDL Ratio :	2.24 - [NORMAL]	< 3.5
TC / HDL Ratio :	4.05 - [NORMAL]	4.0 to 6.0
LDL (DIRECT) :	109.8 mg/dl [Near Optimal]	< 100.0 (Optimal), 100.0 to 120.0 (Near Optimal), 130.0 to 159.0 (Border line high), 160.0 to 189.0 (High), > 190.0 (Very high)

### LIVER FUNCTION TEST

Investigation	Result	Normal Value
Total Bilirubin :	0.63 mg/dl [NORMAL]	0.0 to 1.2
Direct Bilirubin (DBIL) :	0.18 mg/dl [NORMAL]	0.0 to 0.30
ALT (SGPT) :	25.1 IU/L [NORMAL]	[0.0 - 40]
AST (SGOT) :	16.7 IU/L [NORMAL]	<= 45.0
Alkaline Phosphatase (ALP) :	106.7 IU/L [NORMAL]	15 - 80 - ; 37.0 to 147.0

Patient Name :	ROHAN SHARMA R	Sample No. :	SAMPLE-0107716 
Patient ID :	CH-2024-0054210	Visit No. :	OPD/2024/03/0000404
Age/Sex :	29y/Male	Call. Date :	08-Mar-2024 09:01
Referred By :	RIPAL PATEL	S. Coll. Date :	08-Mar-2024 09:52
Ward :	-	Report Date :	08-Mar-2024 11:15

Total Protein (TP) :	<u>7.6</u> gm/dl [NORMAL]	[Adult 6.0 to 7.8]
Albumin (ALB) :	<u>4.5</u> gm/dl [NORMAL]	3.5 to 5.0 (gm/dl)
Indirect Bilirubin (IBIL) :	<u>0.45</u> [NORMAL]	0.0 to 0.75 (mg/dl)
Globulins :	<u>3.1</u> gm/dl [NORMAL]	2.4 to 3.5 (gm/dl)
A/G Ratio :	1.4	

### URINE R & M

Investigation	Result	Normal Value
<b>Physical Examination :</b>		
Quantity :	20 ml	
Colour :	Pale Yellow -	
Appearance :	Clear -	
Odour :	URINIOD -	
Reaction :	Acidic -	
Specific Gravity :	1.025 -	
<b>Chemical Examination :</b>		
Albumin :	Absent -	
Sugar :	Absent -	
Bile Salts :	Absent -	
Bile Pigments :	Absent -	
Acetone :	Absent -	
Urobilinogen :	Absent -	
<b>Microscopic Examination :</b>		
Pus Cells :	1-2 -	
RBCs :	2-3 -	
Epithelial cells :	Occasional -	



# CHARUSAT HOSPITAL



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Age/Sex : 29y/Male	Call. Date : 08-Mar-2024 09:01
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Casts : Absent -  
Crystals : Absent -

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(M.B.B.S,M.D)

ID: 0054210

Name: Sharma, Rohan R  
Age: 29 Years  
Gender: Male

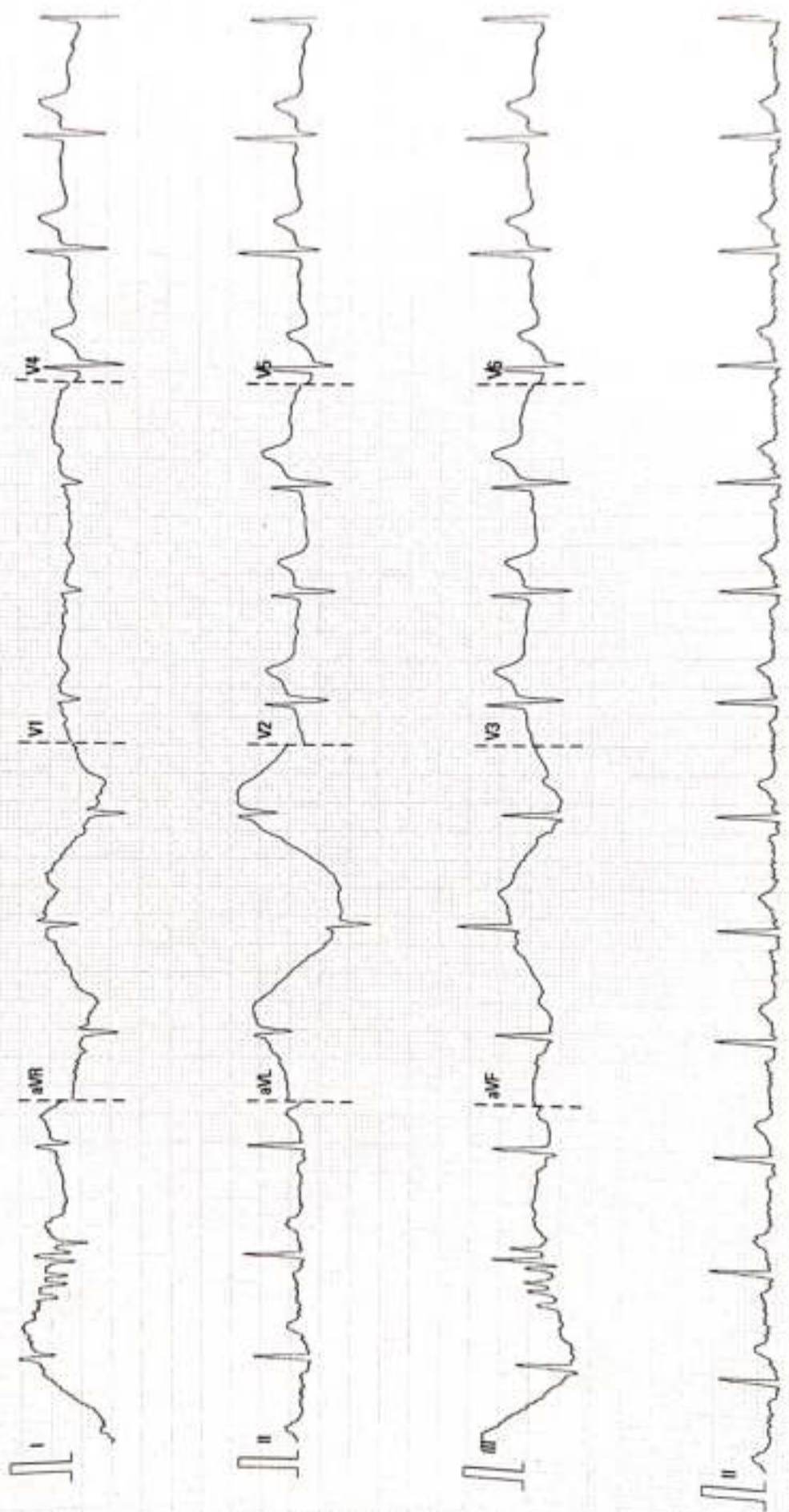
08-03-2024 09:44:24 AM

ECG leads: I, II, III, aVR, aVL, aVF, V1, V2, V3, V4, V5, V6

77 bpm  
130 ms  
94 ms  
360/390 ms  
57/83/24 deg

Sinus rhythm  
Lateral ST elevation - possible early repolarization

Unconfirmed Diagnosis





# LALITABEN P. D. PATEL OPD SERVICES REGISTRATION FORM (OPD)



Dr. Pavan

Date & Time : 8/3/24

Registration No. : CH-24-0054210

Name : Rohan Sharma R Contact No. : (M) \_\_\_\_\_

Age : 29 Sex : m (O) \_\_\_\_\_

Address : \_\_\_\_\_

B.P. : 130/90 mm Pulse : 60/min SpO<sub>2</sub> : 98%

BMI : \_\_\_\_\_ Height : \_\_\_\_\_ Weight : \_\_\_\_\_

## OPD-INITIAL ASSESSMENT FORM

Chief Complaints : \_\_\_\_\_

Recent headache  
No. any complaints

## CASE ANALYSIS

Past History : \_\_\_\_\_

Present History : \_\_\_\_\_

G/E Vitals : \_\_\_\_\_

Systemic Examination : \_\_\_\_\_

### FAMILY HISTORY :

- Diabetes
- IHD
- Hypertension
- Others (Specify) : \_\_\_\_\_

### PATIENT'S MEDICAL/OTHER HISTORY :

- Hypertension  IHD  T.B.  Jaundice
- Epilepsy  Asthma  Hepatitis B  Hepatitis C
- Food Allergy  AIDS/HIV  Bleeding Disorder
- Drug Allergy  Pregnancy

### HABBITTS :

- Smoking  Alcohol  Tobacco  Others (Specify) : \_\_\_\_\_

Investigation/s Advised : \_\_\_\_\_

Provisional Diagnosis : \_\_\_\_\_

Allergy : \_\_\_\_\_

Nutritional Advice : \_\_\_\_\_

**TREATMENT ADVISED**

DATE	DOCTOR'S NOTE	REMARK
01/3/24	C11/13 Dr Ianjung NO orthopaedic complaint <u>side</u> - Regular exercises - Calcium each day <u>Hijau</u>	

Signature with Stamp



# DENTAL REGISTRATION FORM



Name : Rohan Sharma  
 Age : 29  
 Sex : M

Date & Time : 8/3/24  
 Registration No. : CH-24-0054210  
 Contact No. : \_\_\_\_\_  
 Emergency Contact No. : \_\_\_\_\_  
 Address : \_\_\_\_\_

## OPD-INITIAL ASSESSMENT FORM

Chief Complain : Routine Check up

### Family History :

- Diabetes
- Hypertension
- IHD
- Others (Specify) :
- Habits :  Tobacco

- Hypertension
- Diabetes
- Epilepsy
- Bleeding Disorder
- Smoking

### Medical/Other History :

- IHD
- Asthma
- AIDS/HIV
- Pregnancy
- Other (Specify) :
- T.B.
- Hepatitis B
- Food Allergy
- Others (Specify) :

- Jaundice
- Hepatitis C
- Drug Allergy

## સંમતિ પત્રક

હું ..... ડાક્ટરને મારી સારવાર કરવાની મંજૂરી આપું છું. આ સારવારનો પૂરેપૂરો ખર્ચો, કાયદા-ગેરકાયદા, દવાની કે ઇન્જેક્શનની આડ અસર અને સારવારની સફળતા, નિષ્ફળતા વિશે મને તથા મારા સંબંધીઓને સમજૂતી આપેલ છે. મેં ડાક્ટરને મારી શારીરિક સ્થિતિ તથા તેને લગતી દવા વિશે સંપૂર્ણ માહિતી આપેલ છે. જો કોઈપણ સંજોગોમાં સારવાર અધૂરી છોડીશ કે અનિચ્છિત રીતે તો તેની નિષ્ફળતા માટે ડાક્ટર કે ચારુસેટ હોસ્પિટલ જવાબદાર નથી. તથા સારવારની કિંમતો પેટે આપાયેલ રકમ મેળવવા માટે હકકદાર રહીશ નહીં. આ સંમતિ હું સ્વેચ્છાએ કોઈપણ દબાણ વગર આપું છું.

તારીખ : \_\_\_\_\_  
 સમય : \_\_\_\_\_

\_\_\_\_\_   
 દર્દી / સગાની સહી

## CONSENT

I ..... hereby request and authorize Doctor ..... to perform the required dental treatment. Doctor has informed me and my relatives about the treatment plan in details with success and failure of the treatment with all expenditure, possible complications from medicines or local anesthesia. I have informed the Doctor about my medical history and drug history in details. If in any circumstances, I am irregular or leave the treatment in between, the doctor and CHARUSAT Hospital will not be responsible for the same and treatment charges will not be returned back. I give my consent to proceed with my dental treatment.

Date : \_\_\_\_\_  
 Time : \_\_\_\_\_

\_\_\_\_\_   
 Patient's / Relative's Sign.

Investigation Advised : \_\_\_\_\_

Final Diagnosis : \_\_\_\_\_

Treatment Plan : Scaling

Date : \_\_\_\_\_  
 Time : \_\_\_\_\_

Name of Doctor \_\_\_\_\_  
 Signature : \_\_\_\_\_



# DENTAL DEPARTMENT

Follow up

DATE	DOCTOR'S NAME	ESTIMATE	AMOUNT PAID	AMOUNT DUE
8/3/24	Scaling	400/-	400/- 0018076 08-03-24	Nil



# OPHTHALMIC REGISTRATION FORM



Reg. No. : CH-24-0054210

Date : 8/3/24

Patient's Name : Rohan Sharma R Age : 29

Address : \_\_\_\_\_

Telephone No. : \_\_\_\_\_ Mobile No. : \_\_\_\_\_

Referred by / Care of : \_\_\_\_\_

Profession : \_\_\_\_\_

Type or work in daily routine : Driving / Watching TV / Computer / Reading / \_\_\_\_\_

History / Complain of : Diminution of Vision / Pain / Watering / Redness / Eyeache / Headache / Itching / Stickness / Swelling / Irritation / Burning / F. B. Sensation / Photophobia / Diplopia / Squinting / Blackout / Floaters / Flashes / Injury / NO Complaints

Eye Involve : RE / LE / BE Duration : \_\_\_\_\_

Ophthalmic History : Surgery / Laser / FFA / Oct / Glaucoma / RP / Corneal Opacity / Injury / Amblyopia /

### Treatment

Any Surgery : Cataract / Glaucoma / \_\_\_\_\_ / RE / LE / BE Nil

Family History : Glaucoma / RP / DM / \_\_\_\_\_ Nil

SYSTEMIC : DM / HT / IHD / COPD / PROSTATE / WROID / ALLERGY / SMOKING / ALCOHOL Nil

### EYE DETAILS :

RE

LE

V/A with PH 6/6 6/6

IOP 13 mmHg 12 mmHg

OWN GLASS : \_\_\_\_\_

AR : +0.50 / +0.25 x 80 +0.75 / +0.25 x 65

### GLASS PRESCRIPTION

	R. E. V/A			L. E. V/A		
		CYL.	AXIS	SPH.	CYL.	AXIS
Dis			6/6	plano		6/6
Nr.	plano					
Comp						

Bifocal / Distant / Near only / Constant / Progressive / Photocromatic

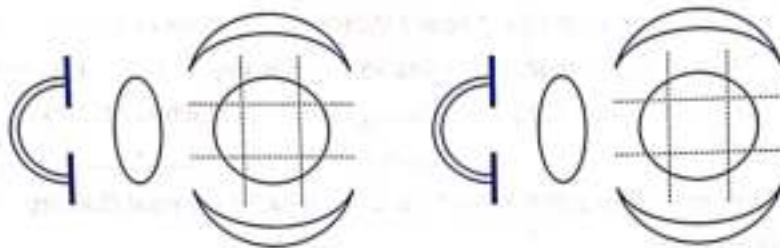
Remark :

Signature : \_\_\_\_\_

[Signature]

(pt refuses dilatation)

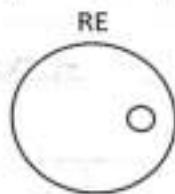
- |               |  |  |
|---------------|--|--|
| Lid           | (N) Swelling / Style / Chalazion / Entropion / Ectropion<br>Blepharitis / Meibominitis                                     | (N) Swelling / Style / Chalazion / Entropion / Ectropion<br>Blepharitis / Meibominitis                                     |
| Lacrimal :    | (N) Swelling / Patent / Partially Patent / Block<br>Punctual Stenosis  | (N) Swelling / Patent / Partially Patent / Block<br>Punctual Stenosis  |
| Conjunctiva : | Chemosis / Congestion / Pterygium / Pingecula  | Chemosis / Congestion / Pterygium / Pingecula  |
| Cornea :      | (N) Clear / Vasculin / Arcus Opacity / Adh Leucoma<br>Epi Defect / Ulcer / Keratitis / Spk                                 | (N) Clear / Vasculin / Arcus Opacity / Adh Leucoma<br>Epi Defect / Ulcer / Keratitis / Spk                                 |
| A/C :         | (N) Shallow / Deep / Hypopyon / Hypheama   | (N) Shallow / Deep / Hypopyon / Hypheama   |
| Pupil :       | (N) Non / Semi Full / Dilated / Synechia / Exfo<br>Pbi / Bi / Irregular / Synechia / Atrophy / Membrane                    | (N) Non / Semi Full / Dilated / Synechia / Exfo<br>Pbi / Bi / Irregular / Synechia / Atrophy / Membrane                    |
| Cataract :    | (N) Cortical / Post Polar / Post subcapsular<br>Nuclear : Grey / Yellow / Brown / Black / Mature<br>Pseudophakia / Aphakia | (N) Cortical / Post Polar / Post subcapsular<br>Nuclear : Grey / Yellow / Brown / Black / Mature<br>Pseudophakia / Aphakia |
| Ant Vit :     | (N) Cells Tobacco Dusting /  | (N) Cells Tobacco Dusting /  |
| Glow :        | (N) Normal / White / Yellow /  | (N) Normal / White / Yellow /  |



**SPECIAL NOTE FUNDS**

- OD**
- Media Clear / VH / Vitritis / Asteroid / Synchronis
- Disc (N) Wnl / Pallor / Edema / Cupping \_\_\_\_\_ / NVD
- B/V (N) NAD / BRVO / BRAO / CRVO / CRAG  
(N) Hemi CRVO / CSCR / ERM / CME / CSME
- Macula : FR N / DULL / CSCR / ERM / CME / CSME  
(N) MH / LMH / CNVM / DRUSEN / GA / HMD  
HGE / ATROPHY / PIGMENT / IJT / ESUDATES
- Cataract : N / MYOPIA / TEES / PIGMENT / HGE / CWS /  
(N) EXUDATES / HGE / -VH / SUBHYALOID / TERA / RD /  
CD / COLOBOMA / BUCKLE / LASER / CRYO / MARKS

- OS**
- Media Clear / VH / Vitritis / Asteroid / Synchronis
- Disc (N) Wnl / Pallor / Edema / Cupping \_\_\_\_\_ / NVD
- B/V (N) NAD / BRVO / BRAO / CRVO / CRAG  
(N) Hemi CRVO / CSCR / ERM / CME / CSME
- Macula : FR N / DULL / CSCR / ERM / CME / CSME  
(N) MH / LMH / CNVM / DRUSEN / GA / HMD  
HGE / ATROPHY / PIGMENT / IJT / ESUDATES
- Cataract : N / MYOPIA / TEES / PIGMENT / HGE / CWS /  
(N) EXUDATES / HGE / -VH / SUBHYALOID / TERA / RD /  
CD / COLOBOMA / BUCKLE / LASER / CRYO / MARKS



REMARK / INVESTIGATION : Dilatation on Follow up.

GONIO / OM

**X**

**X**

COLOR VISION  
FIELD OF VISION  
FFA / OCT  
BSCAN / ASCAN

K READING K1 41.00 @ 168  
K2 41.75 @ 168

K READING K1 41.50 @ 173  
K2 42.25 @ 173

IOL POWER

\_\_\_\_\_

\_\_\_\_\_