

Optometry- H&P

Patients Name: Medicaid2 Test

Sex: Male

Date of Birth: 1/1/2001

20 y, 7 mo

Date of Service: 8/4/2021

Physician Name: Elka Falkowitz,

Insurance: Medicaid Brooklyn

Policy #: A000000A

Chief Complaint:

History of Present Illness:

Pertinent Medical History:

Dermatologic: Admits to cellulitis.

Cardiovascular: Denies angina pectoralis.

Genitourinary: Admits to glomerulonephritis.

Podiatric: Denies nail fungus.

Endocrine: Denies diabetes insipidus.

Allergies:

No Known Drug Allergies.

Medications:

Pertinent Ocular History:

Developmental History:

Educational Development:

Current Rx:

	Sphere	Cylinder	Axis	ADD	Prism
OD					
OS					

Visual Acuity:

		SC	CC	Method
Distance	OD			
	OS			
	OU			

Neurological Exam:

Binocular Testing:

Cover Test:

@ distance:

@ near:

NPC: TTN

Stereo: RDS: []

Color (Ishihara): []

DBI: []

DBO: []

NBI: []

NBO: []

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		Sphere	Cylinder	Axis	Prism	VA	ADD	VA
Retinoscopy/ Auto refraction	OD							
	OS							
Subjective (dry)	OD							
	OS							
Auto Refraction (wet)	OD							
	OS							

NRA: []

PRA: []

Accommodation:

OD: []

OS: []

Method: []

Final RX:

	Sphere	Cylinder	Axis	ADD	Prism
OD					
OS					
<u>Instructions:</u> Polycarbonate lenses, UV coating.					

Slit Lamp Examination:

Tonometry: (1 gtt Fluress, OU)

Method: []

OD: [] mmHg

OS: [] mmHg

Time: []

Dilated Fundus Exam:

Impression:

Plan:

RTO:

Signature:

Elka Falkowitz ,

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