

PROFORMA - I

Remarks/assessment of Chief Medical Officer/Chief Medical Superintendent along with verified/countersigned papers

I, Dr. I. N. Tiwary [Name] CMO/CMS, ARVIND VERMA [Name]
have perused the documents presented before me by Sri UP1860 [Name]
of the Officer]. ID No. ADJ FTC II Designation
and place of posting AZAMGARH OR on his behalf by
Sri AMI CHAND Relation with the officer Father
Phone No. 7060334444

- I. I have personally examined Sri/Smt./Sushri. AMI CHAND
who is suffering from the disease/syndrome/disability ARM D BE C IMSC BE
[Name of the disease] and in my opinion he/she may require
frequent hospitalization for treatment/management.
- II. I also verify that Sri/Smt./Sushri. AMI CHAND is
suffering from the disease/syndrome/disability/disorder ARM D BE C IMSC BE
[Name of the disease] and the disease(s) find(s) mention at
paragraph no. of the Annexure-1 enclosed herewith.
- III. In my professional opinion and assessment, I am convinced that the
treatment/management of the above-mentioned disease/syndrome/
disability/disorder in paragraph two above is possible at the districts
mentioned by the officer in his/her application submitted to Hon'ble
High Court.
- IV. The treatment/management of the above-mentioned disease/
syndrome/disability/disorder in paragraph two above is also available
at the districts namely Gautam Budh Nagar, Agra
- V. I am aware that this document may be presented by the competent
authority/applicant for further use by a competent Medical Board.
- VI. This document shall be valid only for months only.

Report of Eye Surgeon Dr. J.P. Srivastava
Div. Distt Hospital Azamgarh
is attached

[Signature]
Signature with seal अधिकारी
(C.M.O./C.M.S.)
Name: Dr. I. N. Tiwary
ID No.: 32072
Designation: C.M.O.
Telephone No.
Mobile No. 8025192635

1. Concerned District Judge/Officers in equivalent rank to get these matter expedited from the office of CMO/CMS.
2. The CMO/CMS are requested to retain the copy of this documents and documents placed before them for issuance of this document for future reference.



UHID: 20240098507

Divisional District Hospital Azamgarh
Harra Ki Chungi Azamgarh
UTTAR PRADESH

CONSULTING ROOM NO :1,2
CLINIC : Emergency opd, TOKEN NO : 68

CASUALTY

Name : Mr. AMICHAND

Department : Emergency

ER.No : 2024/078/0019691

Date of Registration : 29-04-2024 01:10:42 PM

Unit : Unit-1

Age : 83Y

Billing Type : General

Mobile No :

Email :

Address : NA, Azamgarh, UTTAR PRADESH, INDIA

Brought By : Self

Fee : 0.00

Sex : Male

S/O: LATE RAM PAL

Occupation : OTHER

Patient Type:NON MLC

Prepared by:Mr. vinit singh

Presenting Complaints:

Investigation:

M < 4/60
6/60
MCPH < 4/60
6/60
(NO improvement)

ARMD BE C
IMSC BB

Examination:

P:

BP:

R:

Refer to Retina clinic
DR. R.P. Centre
AIIMS, New Delhi

R
BB [- ELD GMC 0000
- Cap Eyefit 100

डा० वीर प्रकाश शर्मा
विज्ञान सचिव
मण्डलीय जिला चिकित्सालय, आजमगढ़
रजि०-50897
Doctor's Name
Signature / Date



SHARP VISION EYE CARE & LASER CENTRE

[SHARP VISION HOSPITAL]

Near Amroha Green, Joya Road, Amroha



Patient Name Mr. Arnichand
Age & Gender 83 M

Address J-9 Judge Complex Amroha
Date 06/01/2024

UHID SVH-15878
OPD ID 09

COMPLAINTS

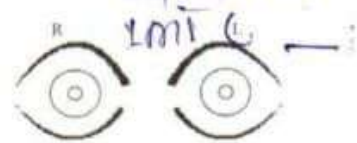
Low vision both the eyes since last 3-4 years

SYSTEMIC ILLNESS

Hypertention - Yes / No
DIABETIC - Yes / No
CAD / STROKE -

TB / COPD / Asthama / Allergy :
Thyroid Disorder :
RA :

KIC of ARMD Both the eyes with



Visual Acuity	RIGHT EYE Vn			LEFT EYE Vn		
	Unaided	WPH	VnGL	Unaided	WPH	VnGL
Distance	<u>4/60</u>		<u>NI</u>	<u>6/60</u>		<u>NI</u>
Near Vision						

IOP Method	RE	LE
NCT (mmHG)	<u>14</u>	<u>14</u>
CT (micron)	<u>470</u>	<u>475</u>
Colour Vision		

REFRACTION :

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	Vn	SPH	CYL	AXIS	Vn
Distance	<u>—</u>				<u>—</u>			
Near Add								

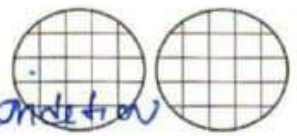
Dilate B/E

EXAMINATION :

ARMD with KIC B/E

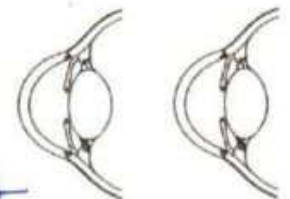
DIAGNOSIS :

No improvement in condition



TREATMENT :

Refer to Arms New Delhi
for surgery Deptment



(Q. P. Centre - Arms)

(Optometrist)

Checked By

Dr. Pankaj Kumar
M.B.B.S., M.S. (OPHTHAL.)
Consultant Eye Surgeon
Regd. No. UPMC 056870

Cataract	Glaucoma	Retina	Oculoplastic	Contact Lens
<ul style="list-style-type: none"> World Class Mirco Phaco Cataract Surgery Multifocal Lens Toric IOL For Astigmatism Yag Laser (For After Cataract) 	<ul style="list-style-type: none"> Computerised Field Analyzer Appalanation Tonometer Gonioscopy 3D - OCT Glaucoma Surgery 	<ul style="list-style-type: none"> Fundus Fluorscein Angiography Green Laser for Retinal Diseases Anti VEGF 3D - OCT B-Scan 	<ul style="list-style-type: none"> DCR Surgery Ptosis Surgery Squint Squint Surgery (All Types of Squint) 	<ul style="list-style-type: none"> All types of Contact Lens Computerised Eye Testing Lasik Laser For Removal of Glasses (By Appointment)



SHARP VISION EYE CARE & LASER CENTRE

[SHARP VISION HOSPITAL]

Near Amroha Green, Joya Road, Amroha



Patient Name **MR. AM CHAND** Address **J-20 CIVIL LINE ALIGARH** UHID **SVH-15878**
 Age & Gender **83y/m** Date **14/08/2023** OPD ID **-37**

COMPLAINTS

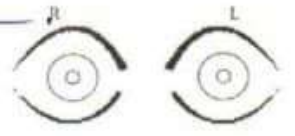
Low vision since last 3-years. glare, Colours & Halos since at night.

SYSTEMIC ILLNESS

Hypertension Yes / No
 DIABETIC - Yes / No
 CAD / STROKE -

TB / COPD / Asthama / Allergy :
 Thyroid Disorder :
 RA: **Psychiatric Problem**

Visual Acuity	RIGHT EYE Vn			LEFT EYE Vn			IOP Method	RE	LE
	Unaided	WPH	VnGL	Unaided	WPH	VnGL			
Distance	4/60		NI	6/60		NI	NCT (mmHG)	18	17
Near Vision							CT (micron)		
							Colour Vision		



REFRACTION :

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	Vn	SPH	CYL	AXIS	Vn
Distance								
Near Add								

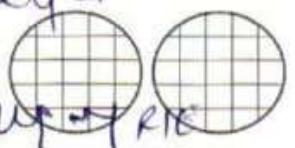
ARMED EYE

EXAMINATION :

Immature Senile Cataract Both the eyes.

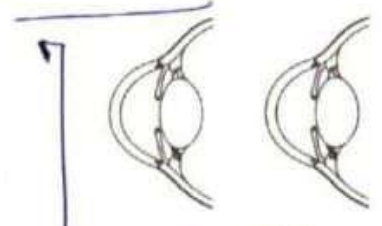
DIAGNOSIS :

Refractive Error / Cataract sup of R/E
 Dilat EYE



TREATMENT :

R - Cap oxy site daily
 - Cap Am 3 times
 - Lubricate 3 times



(Optometrist)

Refer to AIMS New Delhi for Retina Department

Checked By

Dr. Rakesh Kumar
 M.B.B.S., M.S.
 Consultant Eye Surgeon
 Reg. No. 05688

Cataract	Glaucoma	Retina	Oculoplastic	Contact Lens
<ul style="list-style-type: none"> World Class Micro Phaco Cataract Surgery Multifocal Lens Toric IOL For Astigmatism Yag Laser (For After Cataract) 	<ul style="list-style-type: none"> Computerised Field Analyzer Appalation Tonometer Gonioscopy 3D - OCT Glaucoma Surgery 	<ul style="list-style-type: none"> Fundus Fluorescein Angiography Green Laser for Retinal Diseases Anti VEGF 3D - OCT B-Scan 	<ul style="list-style-type: none"> DCR Surgery Ptosis Surgery Squint Squint Surgery (All Types of Squint) 	<ul style="list-style-type: none"> All types of Contact Lens Computerised Eye-Testing Lasik Laser For Removal of Glasses (By Appointment)

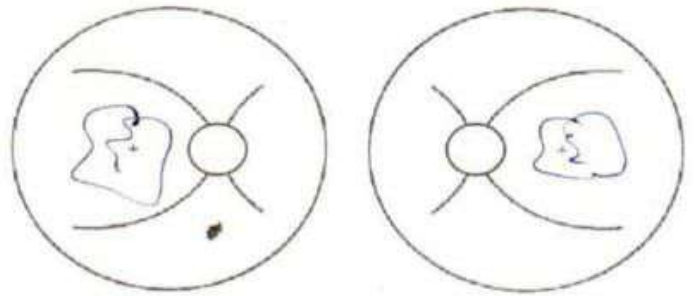
Sunday Closed (रविवार अवकाश)

Timing :

Valid for 7 days only

POST. SEGMENT / FUNDUS

SLE { IMIC NS LH
EMSE NS- 0-1H



VSLE 0.3002
HORIZ
vs. Attention

Severe central

geographic Atrophy with
Drusen over macular
Area

14/08/22
Dr. Pankaj Kumar
M.B.B.S., M.S
Consultant Eye Surgeon
Reg. No. 056879