

APPENDIX - I

DEPARTMENT OF OPHTHALMOLOGY,  
M.L.B. MEDICAL COLLEGE & HOSPITAL, JHANSI.

PROFORMA FOR EXAMINATION

Case No. : Date :

1. Name of Investigator :
2. Surgeon I/c :
3. Place :

Details of Patient :

1. Name :
2. Age / Sex :
3. Ward / Bed :
4. Occupation :
5. Address :
6. Socio-economic status :
7. Habit of taking any intoxication :

A. Presenting Symptoms :

- 1.
- 2.
- 3.
- 4.
- 5.

B. Brief history of present illness :- Past History :

H/o Hypertension

Diabetes

Tuberculosis

Any other

- Family History :