

PATIENT INFORMATION						
LAST NAME JOGEE	FIRST NAME SHARDHA	M.I.	SSN	DATE OF BIRTH 04/07/1970	SEX Female	MRN 1669625
STREET ADDRESS 6601 SUMAC DR			STREET ADDRESS CONTD.			
CITY AUSTIN	STATE TX	ZIP CODE 78731	HOME PHONE 5125777823	CELL PHONE 5125777823		

GLASSES RX DETAILS						
	SPHERE	CYLINDER	AXIS	ADD	START	EXP. DATE
OD	Plano			+2.50	01/09/24	01/09/25
OS	-0.25	+0.25	180	+2.50	01/09/24	01/09/25

VISUAL ACUITY			
	Dist VA	Near VA	Underlying condition
OD	20/20		
OS	20/20		
OU			

**ADDITIONAL INFORMATION**

Active Yes

Electronically Signed By: Jeffery R Lane, OD 01/09/2024 @ 10:53 AM  
 State Lic: 5522TG State: TX

