

**Patient Name:**  
MOHAMED KARIM,  
MASMOUDI

**Gender:** Male

**Date of Birth:** 10-16-1969

**Patient ID:**

**Date:** 01-07-2026

**Test:** Adult Diagnostic

**Eye Tested:** OU (Both)

**Test ID/Plate ID:** 22

## OU (Both)

### Adult Diagnostic

General Section: 24/25

Tritan Section: 12/12

### Diagnosis

Normal Color Vision

### Calculated

Normal Color Vision

### Notes

No notes added

Authorized  
Signature:



**Digitally signed by:** PATRICK CORREA

**IP Address:** 154.125.147.60

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