

Patient Name: SADOU,

WANE

**Gender:** Male

Date: 10-24-2025 Test: Adult Diagnostic Date of Birth: 07-10-1981

**Patient ID:** 

Eye Tested: OU (Both)

Test ID/Plate ID: 9

## **OU (Both)**

Adult Diagnostic

General Section: 23/25 Tritan Section: 11/12

Diagnosis

Normal Color Vision

Calculated

Normal Color Vision

**Notes** 

No notes added

Authorized Signature:

Digitally signed by: PATRICK CORREA

IP Address: 154.124.78.150

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