

SHRADDHA EYE CARE TRUST

Eye screening Camp OPD Registration

Camp Date: 16/10/2024

SL. NO.	NAME	Camp Location:		DIAGNOSIS	ADDRESS	CONTACT NO.
		AGE	GENDER			
1.	RAMADAS NAIK	70	M	Conj R/L	SHIVANAHALLI	9702588219
2.	SANNAMMA	55	F	Conj R/L	—	9731467044
3.	HONNAIAH	60	M	Conj R/L	—	9741867386
4.	MANJIBAI	51	F	Conj R/L	THOLACHITODDI	8951075865
5.	GURUSWAMY	64	M	R/L / R/L	—	8105228264
6.	GOWRAMMA	71	F	R/L	SHIVANAHALLI	9008951819
7.	BHADRAKALAMMA	66	F	Conj R/L	SHIVANAHALLI	8095133734
8.	CHIKKANUTHAMMA	69	F	Conj R/L	TILALAHARAHOSAHALLI	8746977637
9.	RAMACHANDRA	60	M	R/L / R/L	ARALALI	7829218345
10.	GOWRAMMA	47	F	R/L / R/L	—	1886383062
11.	CHANDRAMMA	38	F	R/L	—	6362727009
12.	GOWRAMMA	65	F	Conj L/R	KASABA HOBLI	914153479
13.	PUTTAMADAIAH	70	M	R/L	—	8661097273
14.	SANGAPPA	67	M	R/L / R/L	TILALAHARAHOSAHALLI	9448821522
15.	GOWRAMMA	73	F	R/L / R/L	SHIVANAHALLI	9606649876
16.	LAKSHMI	44	F	R/L / R/L	GADASAHALI	900470792
17.	SAMUDIGOWDA	78	M	935265	SHIVANAHALLI	—
18.	JAYABAI	69	F	999312	—	9840962483
19.	KEMBALINGTAIAH	69	M	—	—	9740962483
20.	Sono Bai	52	F	935258	—	—
21.	Madamma	78	F	935272	—	—
22.	Jagamma	65	F	935266	—	—
23.	RATHANAMMA	66	F	935264	—	—
24.	MAHARAJOWDA	84	M	935269	—	—

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