



**PRESCRIPTION**

Name of Dispensary: NAMGOGOLI

Date: 30 / 6 / 2016

Name of patient: LUNGO MRISHU

Age: 10 YRS Sex: M

**Rx - PATIENT NEEDS REFERRAL TO HIGHER LEVEL**

1/6 Swelling of Upper Eye lid, more than 4 yrs.  
- Painful, not fluctuant.  
- hard mass and localized.  
fixed to the orbit bone.

**Referral to Ligular Hospital**

Date of Surgery :

Diagnosis :

Prescribers Name: DR. UPENDO ABEID

Upendo