Eyejusters

Data Collection Sheet

Dispenser:
Date:

Name:						Location:					Job:					Notes:
Age	Gender M/F	Occ Code		Distance Vision							Near Vision					
				Before L	Before R	Glasses Y/N	Prod. Code	After L	After R		Before L	Before R	Glasses Y/N	Prod. Code	Better? Y/N	
			D							N						

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Age	Gender M/F	Occ Code		Distance Vision							Near Vision					
				Before L	Before R	Glasses Y/N	Prod. Code	After L	After R		Before L	Before R	Glasses Y/N	Prod. Code	Better? Y/N	
			D							N						

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			D							N						

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