

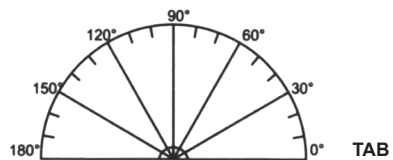
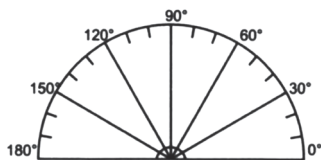
**SERVIZIO SANITARIO NAZIONALE**  
**REGIONE PIEMONTE**  
 Azienda Sanitaria Locale  
 "Città di Torino"

**OSPEDALE OFTALMICO**  
**AMBULATORIO DIVISIONALE**

Torino, \_\_\_\_\_  
 Via Juvarra, 19 10122 TO - Ambulatorio

Sig. \_\_\_\_\_

O. DESTRO			O. SINISTRO		
Sf	Cil	Asse	Sf	Cil	Asse
PER DISTANZA					
A PERMANENZA					
PER MUSICA					
PER VICINO					
PRISMA      BASE			PRISMA      BASE		



**Distanza interpupillare mm** .....

**Note** .....

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