PROFILE

Experienced optometrist providing optometry care to patients. Adapt in performing vision tests and accurately analysing results and Diagnosis disorders.

CONTACT

PHONE:

- +91 9645386381
- +91 9447887636

EMAIL:

Agia111296@gmail.com

PRACTICAL SKILLS

- Streak retinoscopy
- Tonometry (Non contact, Aplanation)
- Biometry (Lenstar)
- Perimetry
- Autorefractometry
- Lensometry
- Keratometry
- Orthoptics instruments
- OCT
- Contact lens
- Pachymetry
- Fundus photo
- Tomography specular tomography
- ECG, Syringing

LANGAUAGES KNOWN

- English
- Malayalam ___
- Hindi



AGIA KS

Optometrist

EDUCATION

Bsc.Optometry

Malabar Institute of Optometry, Bharathiar University 2014 – 2018

Higher Secondary Education

Little Flower Higher Secondary School, Chelakkara State board 2012-2014

High School Education

Holy Family CGHS, Thrissur State Board Holy Family CGHS Chembukkavu located at Thrissur is counted among the top-rated schools in Kerala with an excellent academic track record

WORK EXPERIENCE

Optometrist

Kurians opticians, Kadavanthra 2019 June – Present

Optometrist

Lotus Eye Hospital And Institute, Coimbatore (October 2018-January 2019)

INTERNSHIP PROGRAM

Trinity Eye Hospital, Palakkad 2017-2018

CAMP & CONFERENCE ATTENDED

- Attended CME in optometry update "Refraction And Spectacle Lenses" in school of optometry Govt. Medical college ,Thiruvananthapuram.
- Attended CME –"Refraction" Conducted by Indian Optometry Association Kottayam.
- Successfully Conducted "TUNNEL OF DARKNESS" In our College Malabar Institute Of Optometry.
- Attended CME conducted By Indian Optometry Association held in Alappuzha.

PERSONAL INFORMATION

Father's Name: Shaji K V
Mother's Name: Biji shaji
Date of Birth: 11-Dec-1996
Nationality: Indian
Gender: Female

Permanent address: Kaitharath House, Poomala P.O

Thrissur District, 680581, Kerala

Passport Number R8026796

DECLARATION

I hereby declare that all the above information is correct to the best of my Knowledge and belief.

