



Patient details

Date	:	28-May-2024 / 9:15PM - 9:30PM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	41706 / ABU SUFYAN MUHAMMAD AZAM
Mobile #	:	0554196832
Gender / DOB/Age	:	Male / 15-Jun-1998
Nationality	:	Pakistani
Insurance / Card#	:	KHAT AL HAYA MANAGEMENT OF HEALTH INSURANCE CLAIMS LLC / LL558687
EMID #	:	784-1998-2281409-3





Medical Record details

Complaints

Complaints
pain, swelling, of the left big toe with disfigured big toe nail. Infected ingrowing toe nail.

Past / Family / Social History.

Past History	:	
Other Past History	:	
Family History	:	
Social History - Smoking	:	No
Social History - Alcohol	:	No
Surgical History	:	

Allergies

Allergy Type	Allergy Severity	Allergies	Allergy For	Physical Examination
		No Known Allergies	Unknown	

Vital Signs

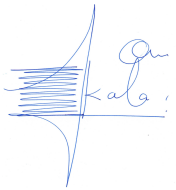
[illegible]

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
28-May-2024	Enomen Goodluck	L03.032	Cellulitis of left toe	
28-May-2024	Enomen Goodluck	L60.0	Ingrowing nail	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS ORAL / TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal	7	14	
CLOFEN / (DICLOFENAC SODIUM : 100 MG) CAPSULES (HARD GELATIN) DICLOFENAC SODIUM [100 MG] / CAPSULES (HARD GELATIN) (10S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) after meal	5	10	



Doctor Signature & Stamp :

