



Patient details

Date	:	18-Jun-2024 / 11:45AM - 12:00PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	26221 / MUHAMMAD RIAZ UL HAQ FEROZE DIN
Mobile #	:	526647587
Gender / DOB/Age	:	Male / 01-Jan-1993
Nationality	:	Pakistani
Insurance / Card#	:	Lifeline / I038-037-120846538-01
EMID #	:	784-1992-4304075-7



Photo
Not
Available

Medical Record details

Complaints

Complaints

co fever bodyache cough prulant running nose 14 june 2024
oe inflamed and enlarge tonsills
chest is congested no added sounds
restless

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

Temperature : 35.8 BPS : 80 BPD : Pulse : 84 Height : 174 cm Weight : 89 kg
BMI : 29.39622 bpm Respiratory : 18 bpm SpO2 : 99% Hip : cm Waist : cm
Head Circumference : cm
Urinalysis (Protein & Glucose) :
Notes : risk for fall

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
18-Jun-2024	Humaira	J06.9	Acute upper respiratory infection, unspecified	
18-Jun-2024	Humaira	R52	Pain, unspecified	
18-Jun-2024	Humaira	R05	Cough	
18-Jun-2024	Humaira	R50.9	Fever, unspecified	
18-Jun-2024	Humaira	J03.90	Acute tonsillitis, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
STOPKOF (ALCOHOL FREE) / (AMMONIUM CHLORIDE : 131.5 MG/5 ML) (DIPHENHYDRAMINE HCL : 13.5 MG/5ML) SYRUP (ALCOHOL FREE) ORAL / SYRUP (ALCOHOL FREE) (100ML, GLASS BOTTLE) / Syrup	Take 10ML 3 Time(s) per Day For 7 Day(s) after meal	1	2	
ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS CAFFEINE/PARACETAMOL [65 MG 500 MG] / CAPLETS (24S, BOX) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
GUPISONE / (PREDNISOLONE : 5 MG) TABLETS PREDNISOLONE [5 MG] / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 12 Time(s) per Day For 5 Day(s) others	5	60	
MIRAZOL / (METRONIDAZOLE : 500 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7	7	
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) others	7	14	

Doctor Scription & Stamp :

