

#### **Patient details**

Date	:	15-Jul-2024 / 5:15PM - 5:30PM	
Doctor	:	Enomen Goodluck(General)	
Reg # / Patient Name	:	43205 / RIZWAN AKRAM MUHAMMAD AKRAM	
Mobile #	:	0561520773	
Gender / DOB/Age	:	Male / 15-Jul-1985	
Nationality	:	Pakistani	
Insurance / Card#	:	KHAT AL HAYA MANAGEMENT OF HEALTH INSURANCE CLAIMS LLC / LL523994	
EMID#	:	784-1985- 2943647-3	

#### **Medical Record details**

#### **Complaints**

#### **Complaints**

Recurrent cough, difficulty breathing and wheezing.

Symptoms are worst at night and when his room mates turn on the AC.

Diagnosed as a case of asthma last visit but did not buy prescribed medications for financial reasons.

Chest exam:

Audible wheezing.

## **Allergies**

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

## **Vital Signs**

**Head Circumference** : cm

Urinalysis (Protein & Glucose) :

Notes : risk for fall

## **Diagnosis**

Date	Doctor	ICD Code	Diagnosis	Notes
15-Jul-2024	Enomen Goodluck	R06.00	Dyspnea, unspecified	
				-

Date	Doctor	ICD Code	Diagnosis	Notes
15-Jul-2024	Enomen Goodluck	R06.2	Wheezing	
15-Jul-2024	Enomen Goodluck	J20.9	Acute bronchitis, unspecified	
15-Jul-2024	Enomen Goodluck	J45.31	Mild persistent asthma with (acute) exacerbation	

# **Prescription**

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
VENTOLIN EVOHALER / (SALBUTAMOL : 100 MCG) AEROSOL INHALER ORAL INHALATION / AEROSOL INHALER (200 DOSE, BLISTER IN DISKUS) / Puff	Take 2Puff 1 Time(s) per Day For 30 Day(s) evening	30	1	
CLARITT / (CLARITHROMYCIN : 500 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal	7	14	
GUPISONE 20MG / (PREDNISOLONE : 20 MG) TABLETS ORAL / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) evening	7	7	
SINGULAIR / (MONTELUKAST : 10 MG) TABLETS ORAL / TABLETS (28S, BLISTER PACK) / Tablets	Take 1Tablets 1Time(s) perDay For 28 Day(s) evening	28	28	
FLUTAB / (DIPHENHYDRAMINE : 25 MG) (PARACETAMOL : 500 MG) (PSEUDOEPHEDRINE : 30 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 10 Day(s) after meal	10	20	
TELFAST 120MG / (FEXOFENADINE HCL : 120 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (30S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 15 Day(s) after meal	15	30	



Doctor Signature & Stamp :