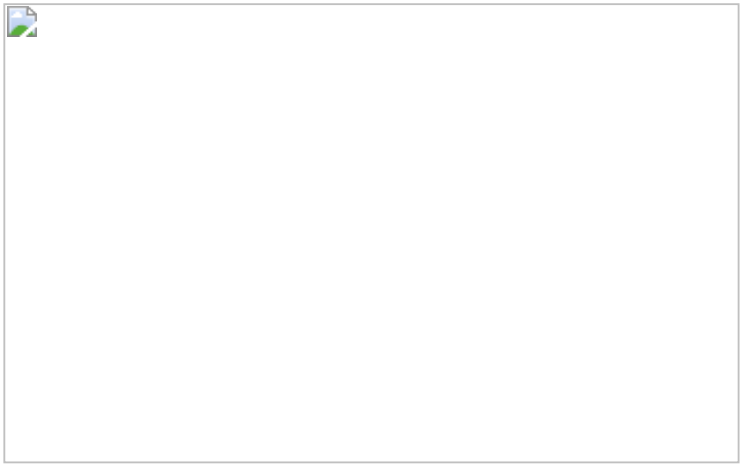
## Patient details

| | | |
|---|---|---|
| **Date** | : | 04-Oct-2024 / 7:45PM - 8:00PM |
| **Doctor** | : | Enomen Goodluck(General) |
| **Reg # / Patient Name** | : | 44392 / NAREEKA KAINTH |
| **Mobile #** | : | 0503567708 |
| **Gender / DOB/Age** | : | Female / 07-Aug-1994 |
| **Nationality** | : | United Nations |
| **Insurance / Card#** | : | E CARE - Blue Network / I040-029-121210616-01 |
| **EMID #** | : | 784-1994-2942649-9 |




## Medical Record details

## Complaints

### Complaints

PC: Severe headache, high grade fever, pain in throat, nasal congestion and runny nose.

Duration: 5days (29/09/2024)

No chest pain, has slight difficulty breathing and nausea.

## 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** : 38.4 **BPS** : 78 **BPD** : **Pulse** : 108 **Height** : 164 cm **Weight** : 70 kg

**BMI** : 26.02617 bpm **Respiratory** : 18 bpm **SpO2** : 98% **Hip** : cm **Waist** : cm

**Head Circumference** : cm

**Urinalysis (Protein & Glucose)** :

**Notes** : RISK FOR FALL

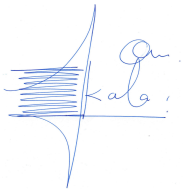
## Diagnosis

| Date | Doctor | ICD Code | Diagnosis | Notes |
|---|---|---|---|---|
| 04-Oct-2024 | Enomen Goodluck | R07.9 | Chest pain, unspecified | |
| 04-Oct-2024 | Enomen Goodluck | R50.9 | Fever, unspecified | |
| 04-Oct-2024 | Enomen Goodluck | J06.9 | Acute upper respiratory infection, unspecified | |

## Prescription

| Generic/Dose/Form | Instructions | Duration | Quantity | Refill |
|---|---|---|---|---|
| BETADINE THROAT SPRAY / (POVIDONE IODINE : 0.45%) SPRAY SOLUTION LOCAL ORAL / SPRAY SOLUTION (50ML, BOTTLE) / Spray | Take 1Spray 4 Time(s) per Day For 5 Day(s) others | 5 | 1 | |
| GUPISONE 20MG / (PREDNISOLONE : 20 MG) TABLETS ORAL / TABLETS (20S, BLISTER PACK) / Tablets | Take 1Tablets 1 Time(s) per Day For 7 Day(s) after meal | 7 | 7 | |
| MACROMAX 500 / (AZITHROMYCIN : 500 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (6S, BLISTER) / Tablets | Take 1Tablets 1 Time(s) per Day For 6 Day(s) after meal | 6 | 6 | |
| ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets | Take 1Tablets 1 Time(s) per Day For 10 Day(s) after meal | 10 | 10 | |
| FLUTAB / (DIPHENHYDRAMINE : 25 MG) (PARACETAMOL : 500 MG) (PSEUDOEPHEDRINE : 30 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets | Take 1Tablets 2Time(s) perDay For 10 Day(s) after meal | 10 | 20 | |

**Doctor Signature & Stamp :**



Dr. Enomen Goodluck Ekata
General Practitioner
DHA No: 28040827-001
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