

No.

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Dear Doctor : We are pleased that our member is consulting you for medical care and kindly ask you to complete this SOA complying with all MedNet's Network procedures. Thank you

SUBJECTIVE

OBJECTIVE

CONSULTATION

ASSESSMENT

PHARMACEUTICALS

(BUDESONIDE : 0.5 MG/ML) SUSPENSION FOR NEBULIZATION,SUSPENSION FOR NEBULIZATION (2ML X 20, UNIT),29-, (TIOTROPIUM BROMIDE : 18 MCG) CAPSULES (HARD GELATIN) FOR INHALATION (DRY POWDER),CAPSULES (HARD GELATIN) FOR INHALATION (DRY POWDER) (30S + 1, BLISTER + HANDIHALER DEVICE),30-, (DICLOFENAC POTASSIUM : 50 MG) POWDER FOR SOLUTION,POWDER FOR SOLUTION (30S, SACHET),30-, (DICLOFENAC SODIUM : 100 MG) COATED TABLETS,COATED TABLETS (30S, BLISTER PACK),30-, (DEXLANSOPRAZOLE : 60 MG) MODIFIED RELEASE CAPSULES,MODIFIED RELEASE CAPSULES (14S, BLISTER PACK),30-, (CALCIPOTRIOL : 50 MCG/G) (BETAMETHASONE (AS DIPROPIONATE) : 0.5 MG/G) GEL,GEL (60G, HDPE BOTTLE),30-, (ACYCLOVIR : 200 MG) TABLETS,TABLETS (25S, BLISTER PACK),14-, (ACYCLOVIR : 5%) CREAM,CREAM (2G , PUMP PACK),30-

DIAGNOSTIC PROCEDURES

Mild intermittent asthma, uncomplicated, Low back pain, Gastro-esophageal reflux disease without esophagitis, Herpesviral infection, unspecified

ICD10 code:

J45.20, M54.5, K21.9, B00.9

Physician's Name: AHSAN HUSSAIN

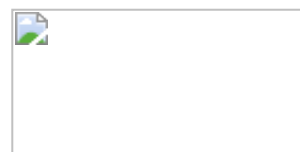
Telephone No.: 0521644729

Date: 17-10-2024

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