Patient details

Date	:	08-Nov-2024 / 3:15PM - 3:30PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	44814 / ANARBEK KOZHOMBERDI UULU
Mobile #	:	0501521301
Gender / DOB/Age	:	Male / 08-Dec-1999
Nationality	:	Kyrgyzstani
Insurance / Card#	:	FMC Standard Network / I005-010-118947913-01
EMID #	:	784-1999-8271170-8

Photo Not Available

Medical Record details

Complaints

Complaints

co infection onthe left fooot allergy itching 25th ooct 2024

oe chest is clear no added sounds

stable

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 : 36.8 **BPS** : 60 **BPD** : **Pulse** : 74 **Height** : 173 cm **Weight** : 62 kg

BMI : 20.71569 bpm **Respiratory** : 18 bpm **SpO2** : 99% **Hip** : cm **Waist** : cm

Head Circumference : cm

Urinalysis (Protein & Glucose) :

Notes : RISK FOR FALL

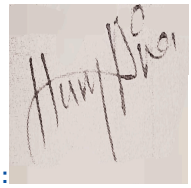
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
08-Nov-2024	Humaira	L53.9	Erythematous condition, unspecified	
08-Nov-2024	Humaira	T78.40XS	Allergy, unspecified, sequela	
08-Nov-2024	Humaira	R21	Rash and other nonspecific skin eruption	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
CANDIVAST 150MG / (FLUCONAZOLE : 150 MG CAPSULES ORAL / CAPSULES (1S, BLISTER / Capsule	Take 1Capsule 1 Time(s) per Week For 5 Day(s) others	5	5	
BETNOVATE CREAM / (BETAMETHASONE : 0.1%) CREAM BETAMETHASONE [0.1%] / CREAM (30G, TUBE) / Cream	Take 1Cream 1Time(s) perDay For 1 Day(s) others	1	1	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablet at night	10	10	

Doctor Signature & Stamp :



Dr. Humaira Mumtaz
General Practitioner
DHA No: 54155530-002
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.