Patient details

Date	:	12-Nov-2024 / 6:15PM - 6:30PM
Doctor	:	AHSAN HUSSAIN(General)
Reg # / Patient Name	:	44884 / JOAN RAFAGA GARCIA
Mobile #	:	052364125
Gender / DOB/Age	:	Female / 20-Jun-1987
Nationality	:	Philippine
Insurance / Card#	:	NEXTCARE -OP PCP / FA86-A7B9-0221-AAED
EMID #	:	784-1987-0707473-2

Medical Record details

Complaints

Complaints

pc: fever 1 day 12/11/2024

flu

cough

headache

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	: 36.6	**BPS**	: 60	**BPD**	:	**Pulse**	: 88	**Height**	: 152 cm	**Weight**	: 55 kg
BMI	: 23.8054 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
12-Nov-2024	AHSAN HUSSAIN	R51.9	Headache, unspecified	
12-Nov-2024	AHSAN HUSSAIN	K21.9	Gastro-esophageal reflux disease without esophagitis	
12-Nov-2024	AHSAN HUSSAIN	J20.9	Acute bronchitis, unspecified	
12-Nov-2024	AHSAN HUSSAIN	J00	Acute nasopharyngitis [common cold]	
12-Nov-2024	AHSAN HUSSAIN	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
SINECOD / (BUTAMIRATE DIHYDROGEN CITRATE : 0.15% W/V SYRUP ORAL / SYRUP (200ML, BOTTLE / Syrup	Take 1Syrup 2 Time(s) per Day For 7 Day(s) after meal	7	1	
FLUTAB / (DIPHENHYDRAMINE : 25 MG) (PARACETAMOL : 500 MG) (PSEUDOEPHEDRINE : 30 MG) FILM COATED TABLETS DIPHENHYDRAMINE/PARACETAMOL/PSEUDOEPHEDRINE [25 MG|500 MG|30 MG] / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal	7	14	
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG|875 MG] / TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal	7	14	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 5 Day(s) others	5	5	

Progress Notes

Date	Notes	Visit Plan	Other Instructions	Made By	Date Recorded
12-Nov-2024	bed rest for 2 days follow up after 7 days take medication as prescribed			AHSAN HUSSAIN	12-Nov-2024 18:25:53

Doctor Signature & Stamp :