



Patient details

Date	:	20-Nov-2024 / 2:30PM - 2:45PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	44964 / NAZRUL ISLAM ABUL BASHAR
Mobile #	:	0547866410
Gender / DOB/Age	:	Male / 10-Jan- 1984
Nationality	:	Bangladeshi
Insurance / Card#	:	KHAT AL HAYA MANAGEMENT OF HEALTH INSURANCE CLAIMS LLC / LL523938
EMID #	:	784-1984- 3091064-0



Photo
Not
Available

Medical Record details

Complaints

Complaints

co epigastric pain so sever 18th nov. 2024

oe chest is clear no added sounds

restless

Vital Signs

Temperature : 36.8 BPS : 60 BPD : Pulse : 86 Height : 166 cm Weight : 58 kg

BMI : 21.04805 bpm Respiratory : 18 bpm SpO2 : 99% Hip : cm Waist : cm

Head Circumference : cm

Urinalysis (Protein & Glucose) :

Notes : RISK OF FALL

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
20-Nov-2024	Humaira	R10.13	Epigastric pain	
20-Nov-2024	Humaira	K29.00	Acute gastritis without bleeding	

Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
14:52:25	03:10:00	0005-242802-0781	(PANTOPRAZOLE (AS SODIUM) : 40 MG) POWDER FOR INFUSION-PANTONIX 40MG I.V.	NA	NA	iv push
14:52:25	03:10:00	96374	IV INJECTION (W/O DRUG CHARGES)	NA	NA	

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
00:00:00	00:00:00	9	GP CONSULTATION	NA	NA	
00:00:00	00:00:00	0005-136504-1021	(HYOSCINE : 20 MG/ML) SOLUTION FOR INJECTION-SCOPINAL	NA	NA	im
00:00:00	00:00:00	0102-100104-1001	(SODIUM CHLORIDE : 0.9%) (DEXTROSE : 5%) SOLUTION FOR INFUSION-SODIUM CHLORIDE & DEXTROSE B.P.	NA	NA	iv hydration
00:00:00	00:00:00	96372	IM INJECTION (W/O DRUG CHARGES)	NA	NA	
00:00:00	00:00:00	96360	IV FLUIDS	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
BUSCOPAN / (HYOSCINE : 10 MG) TABLETS HYOSCINE [10 MG] / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablet as per need	3	6	
MAALOX PLUS / (ALUMINIUM HYDROXIDE : 225 MG/5ML (SIMETHICONE : 25 MG/5 ML (MAGNESIUM HYDROXIDE : 200 MG/5ML SUSPENSION ORAL / SUSPENSION (180ML, PLASTIC BOTTLE / Syrup	Take 10ML 3 Time(s) per Day For 7 Day(s) after meal	1	1	
NEXIUM / (ESOMEPRAZOLE : 20 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (14S, BLISTER PACK / Tablets	Take 1Tablets 2 Time(s) per Day For 14 Day(s) others	14	28	

Doctor Signature & Stamp :


