Patient 40122 KAILASH DAGDE DEVANNA DAGDE 784-1998-6532904-1 Repeat
26 Male Indian S NGI - HN BASIC PLUS - NGI - Default Scheme (99999)
Medical History (patient_history.aspx?patId=46144) Billing History (patient_accounts.aspx?patId=46144)

Appointment Visit ID 55413 29-Nov-2024 Humaira - General - DHA-P-54155530
MRN Activities(Log) Insurance Cards EMID Card

Vitals Alert This Patient has Vitals for Temp: 36.2°C, Pulse: 86bpm, BP: 110mmHg, Height: 168cm, Weight: 68kg, BMI 24.09(Obese), Blood Sugar

Start Time | Nurse Station | Doctor Evaluation | Orthopedic Case Assessment | Diagnosis | Treatments/Procedures | Packages | Prescription | Reimbursement Forms | Documents | Progress Notes | Addendum | NGI Form | NGI Claim Form | Other Forms | Sick Leave | End Time | Visit Summary Sheet | Nabidh Clinical Docs | Audit Log | Radiology | Laboratory | Health Declaration | Signed Documents | Image Comparison

29-Nov-2024	Humaira	J30.9	Allergic rhinitis, unspecified
29-Nov-2024	Humaira	J06.9	Acute upper respiratory infection, unspecified

Treatments

Start Time	End Time	CPT Code	Treatment	T N
12:23:46	12:25:00	0005-149902-1021	CLOFEN -(DICLOFENAC SODIUM : 75 MG/3ML) SOLUTION FOR INJECTION	N
12:23:46	12:25:00	96372	Intramuscular injection	N
00:00:00	00:00:00	94640	nebulization with ventoline solution	N
00:00:00	00:00:00	9	Office consultation for a new or established patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patients and/or familys needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 15 minutes face-to-face with the patient and/or family.	

Prescription

Generic/Dose/Form	Instructions	Dura
BETNOVATE CREAM / (BETAMETHASONE : 0.1%) CREAM BETAMETHASONE [0.1%] / CREAM (30G, TUBE) / Cream	Take 1Cream 1Time(s) perDay For 1 Day(s) others	1
GERDIL 20 / (ESOMEPRAZOLE (AS MAGNESIUM : 20 MG DELAYED RELEASE CAPSULES ORAL / DELAYED RELEASE CAPSULES (30S, CONTAINER / Capsule	Take 1Capsule 2 Time(s) per Day For 7 Day(s) others	7
AMYDRAMINE - II / (DIPHENHYDRAMINE : 12.5 MG/5ML SYRUP (SUGAR FREE ORAL / SYRUP (SUGAR FREE (120ML, BOTTLE / Syrup	Take 10ML 3 Time(s) per Day For 7 Day(s) after meal	1
ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS CAFFEINE/PARACETAMOL [65 MG|500 MG] / CAPLETS (24S, BOX) / Tablets	Take 1Tablets 2 Time(s) per Day For 6 Day(s) others	6
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG|875 MG] / TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7