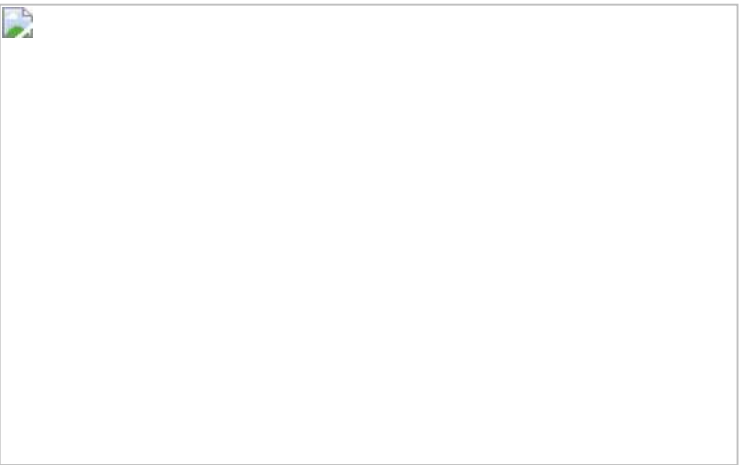




## Patient details

|                      |   |                                               |                                                                                    |                                                                                     |
|----------------------|---|-----------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Date                 | : | 30-Nov-2024 / 6:00PM - 6:15PM                 |  |  |
| Doctor               | : | AHSAN HUSSAIN(General)                        |                                                                                    |                                                                                     |
| Reg # / Patient Name | : | 26131 / RAMESH CHANDRA PATIDAR                |                                                                                    |                                                                                     |
| Mobile #             | : | 0563834759                                    |                                                                                    |                                                                                     |
| Gender / DOB/Age     | : | Male / 15-Jul-1978                            |                                                                                    |                                                                                     |
| Nationality          | : | Indian                                        |                                                                                    |                                                                                     |
| Insurance / Card#    | : | E CARE - Blue Network / I040-029-113722477-01 |                                                                                    |                                                                                     |
| EMID #               | : | 784-1978-0971916-0                            |                                                                                    |                                                                                     |

## Medical Record details

## Complaints

## Complaints

pc: cough 29/11/2024

wheezing

fever

## Vital Signs

Temperature : 37.5      BPS : 100      BPD :      Pulse : 86      Height : 178 cm      Weight : 83 kg  
 BMI : 26.19619 bpm      Respiratory : 19 bpm      SpO2 : 99%      Hip : cm      Waist : cm  
 Head Circumference : cm  
 Urinalysis (Protein & Glucose) :  
 Notes : RISK OF FALL

## Diagnosis

| Date        | Doctor        | ICD Code | Diagnosis                     | Notes |
|-------------|---------------|----------|-------------------------------|-------|
| 30-Nov-2024 | AHSAN HUSSAIN | R50.9    | Fever, unspecified            |       |
| 30-Nov-2024 | AHSAN HUSSAIN | R07.1    | Chest pain on breathing       |       |
| 30-Nov-2024 | AHSAN HUSSAIN | J45.991  | Cough variant asthma          |       |
| 30-Nov-2024 | AHSAN HUSSAIN | J20.9    | Acute bronchitis, unspecified |       |

## Prescription

| Generic/Dose/Form                                                                                                                 | Instructions                                        | Duration | Quantity | Refill |
|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|----------|--------|
| MUCOLYTE / (BROMHEXINE HYDROCHLORIDE : 8 MG) TABLETS<br>BROMHEXINE HYDROCHLORIDE [8 MG] / TABLETS (1000S, BLISTER PACK) / Tablets | Take 1Tablets 2 Time(s) per Day For 5 Day(s) others | 5        | 10       |        |
| ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets   | Take 1Tablets 2 Time(s) per Day For 7 Day(s) others | 7        | 14       |        |
| MUCUM / (AMBROXOL : 15 MG/5ML SYRUP (SUGAR FREE ORAL / SYRUP (SUGAR FREE (100ML, GLASS BOTTLE / Syrup                             | Take 1Syrup 3 Time(s) per Day For 7 Day(s) others   | 7        | 1        |        |



Doctor Signature & Stamp :