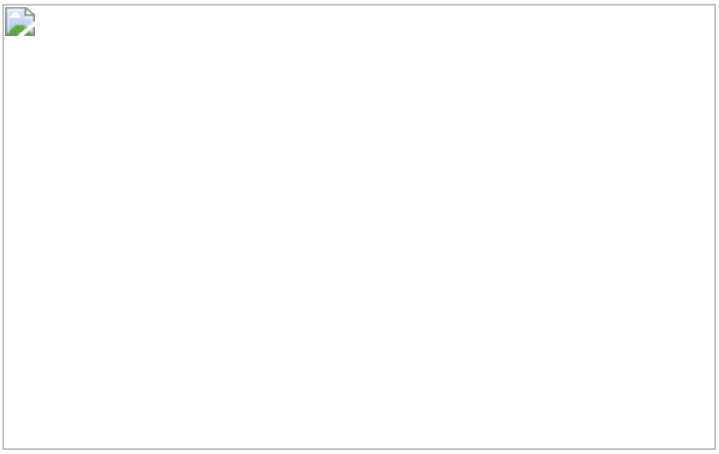
Patient details

Date	:	17-Feb-2025 / 1:00AM - 1:15AM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	37926 / YAGMUR IZCL
Mobile #	:	0509579591
Gender / DOB/Age	:	Female / 25-Apr-1991
Nationality	:	Turkish
Insurance / Card#	:	NAS VN / RL65-TPLM-VMVR-PVAE
EMID #	:	784-1991-2111117-5



Medical Record details

Complaints

Complaints

patient came with productive cough,redness and swollen tongue.

o/e there is chest congesion and rendess and swelling in tongue,

Allergies

Allergy Type	Allergy Severity	Allergies	Allergy For	Physical Examination
		No Known Allergies	Unknown	

Vital Signs

Temperature	: 36.3	**BPS**	: 65	**BPD**	:	**Pulse**	: 73	**Height**	: 0 cm	**Weight**	: 90.5 kg
BMI	: ∞ bpm	**Respiratory**	: 0 bpm	**SpO2**	: %	**Hip**	: cm	**Waist**	: cm		
Head Circumference		:	cm								
Urinalysis (Protein & Glucose)		:									
Notes	:										

Diagnosis

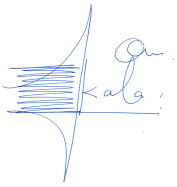
Date	Doctor	ICD Code	Diagnosis	Notes
17-Feb-2025	Enomen Goodluck	R05	Cough	
17-Feb-2025	Enomen Goodluck	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
SERODASE / (SERRAPEPTASE : 10 MG) TABLETS SERRAPEPTASE [10 MG] / TABLETS (30S, BLISTER) / Tablets	Take 1Tablets 1 Time(s) per Day For 5 Day(s) others	5	5	

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
KUFDRIN / (SODIUM CITRATE : 57 MG/5ML) (AMMONIUM CHLORIDE : 131.5 MG/5 ML) (MENTHOL : 1.1 MG/5 ML) (DIPHENHYDRAMINE HCL : 13.5 MG/5ML) SYRUP SODIUM CITRATE/AMMONIUM CHLORIDE/MENTHOL/DIPHENHYDRAMINE HCL [57 MG/5ML|131.5 MG/5 ML|1.1 MG/5 ML|13.5 MG/5ML] / SYRUP (120ML, BOTTLE) / Syrup	Take 1Syrup 2 Time(s) per Day For 5 Day(s) others	5	1	
MACROMAX 250 / (AZITHROMYCIN : 250 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (6S, BLISTER / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) others	5	10	
KLARFAST / (LORATADINE : 10 MG TABLETS ORAL / TABLETS (10S, BLISTER PACK / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) others	5	10	

Doctor Signature & Stamp :



Dr. Enomen Goodluck Ekata
General Practitioner
DHA No: 28040827-001
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.