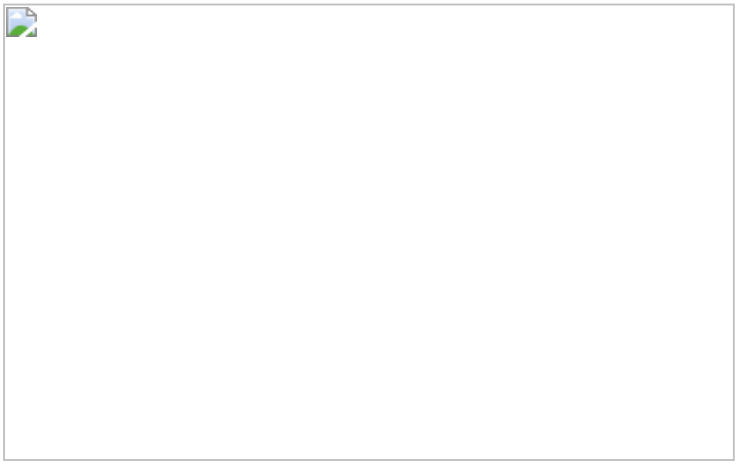
Patient details

Date	:	12-Mar-2025 / 12:30PM - 12:45PM
Doctor	:	AISHA(General)
Reg # / Patient Name	:	45941 / SUBHASHANI HANSAMALI JOSEPHLAGE
Mobile #	:	0529648174
Gender / DOB/Age	:	Female / 28-Sep-2002
Nationality	:	Sri Lankan
Insurance / Card#	:	NAS VN / AGIJ-IJE2-C2CJ-GCDE
EMID #	:	784-2002-5736776-1



Medical Record details

Complaints

Complaints

PATIENT CAME WITH FEVER BODY PAIN AND THROAT CONGESTION

COUGH IS PRODUCTIVE

OE CHEST IS CONGESTED

THROAT IS HYPEREMIC

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	**BPS**	: 80	**BPD**	:	**Pulse**	: 86	**Height**	: 170 cm	**Weight**	: 90 kg
BMI	: 31.14187 bpm	**Respiratory**	: 18 bpm	**SpO2**	: 99%	**Hip**	: cm	**Waist**	: cm		
Head Circumference	:	cm									
Urinalysis (Protein & Glucose)	:										

Notes : risk of fall

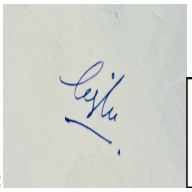
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
12-Mar-2025	AISHA	R06.2	Wheezing	
12-Mar-2025	AISHA	R05	Cough	
12-Mar-2025	AISHA	R50.9	Fever, unspecified	
12-Mar-2025	AISHA	J02.9	Acute pharyngitis, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
GERDIL 20 / (ESOMEPRAZOLE (AS MAGNESIUM : 20 MG DELAYED RELEASE CAPSULES ORAL / DELAYED RELEASE CAPSULES (30S, CONTAINER / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others BEFORE MEAL	7	14	
MUCOPLEXIL 0.33MG/ML / (OXOMEMAZINE : 0.33 MG/ML SYRUP ORAL / SYRUP (150ML, PLASTIC BOTTLE / Syrup	Take 1Syrup 2 Time(s) per Day For 5 Day(s) others	5	10	
ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS CAFFEINE/PARACETAMOL [65 MG|500 MG] / CAPLETS (24S, BOX) / Tablets	Take 1Tablets 3 Time(s) per Day For 5 Day(s) others	5	15	
AUGMENTIN 375MG / (AMOXICILLIN : 250 MG) (CLAVULANIC ACID : 125 MG) FILM COATED TABLETS AMOXICILLIN/CLAVULANIC ACID [250 MG|125 MG] / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
ZYVEX ADVANCED ORAL SPRAY / (HYDROXYPROPYLMETHYLCELLULOSE : 150 MG/ 30ML) SPRAY SOLUTION HYDROXYPROPYLMETHYLCELLULOSE [150 MG/ 30ML] / SPRAY SOLUTION (30ML, SPRAY BOTTLE) / Spray	Take 1Spray 2 Time(s) per Day For 5 Day(s) others	5	10	

Doctor Signature & Stamp :



Dr. Aisha Umer
Physician- General Practitioner
DHA- 40131439-002
CITICARE MEDICAL CENTER
DUBAI - U.A.E