



Patient details		
Date	:	13-Apr-2025 / 5:00PM - 5:15PM
Doctor	:	DR Amaizah(General)
Reg # / Patient Name	:	42422 / PRAGATI ANIL KUMAR
Mobile #	:	0505368371
Gender / DOB/Age	:	Female / 22-Jun-1999
Nationality	:	Indian
Insurance / Card#	:	NAS VN / G4AI-9G4C-DCD2-GDEA
EMID #	:	784-1999-1205093-9
		
		Photo Not Available

Medical Record details

Complaints

Complaints
pc : severe bodypain , lethargy , low grade , fever started 10/04/25
o/e : look lethargic , pale 'dehydrated

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	: 37.3	BPS	: 70	BPD	:	Pulse	: 96	Height	: 158 cm	Weight	: 44 kg
BMI	: 17.62538 bpm	Respiratory	: 18 bpm	SpO2	: 99%	Hip	: cm	Waist	: cm		
Head Circumference	:		cm								
Urinalysis (Protein & Glucose)	:										
Notes	: RISK FOR FALL										

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
13-Apr-2025	DR Amaizah	E86.0	Dehydration	
13-Apr-2025	DR Amaizah	R50.9	Fever, unspecified	
13-Apr-2025	DR Amaizah	R52	Pain, unspecified	
13-Apr-2025	DR Amaizah	J03.90	Acute tonsillitis, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 3 Day(s) evening	3	3	
CURAM 625MG / (AMOXICILLIN : 500 MG) (CLAVULANIC ACID : 125 MG) FILM COATED TABLETS AMOXICILLIN/CLAVULANIC ACID [500 MG 125 MG] / FILM COATED TABLETS (20S, FOIL STRIP) / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) after meal	5	10	
MAXIGESIC / (IBUPROFEN : 150 MG) (PARACETAMOL : 500 MG) FILM COATED TABLETS IBUPROFEN/PARACETAMOL [150 MG 500 MG] / FILM COATED TABLETS (32S, BLISTER) / Tablets	Take 1Tablets 1 Time(s) per Day For 3 Day(s) after meal	3	3	

Doctor Signature & Stamp :

