



Patient details

Date	:	22-Apr-2025 / 12:00PM - 12:15PM		
Doctor	:	DR Amaizah(General)		
Reg # / Patient Name	:	31791 / ANAM HOSSAIN ABDUL QUDDUS		
Mobile #	:	0553108331		
Gender / DOB/Age	:	Male / 25-May-1988		
Nationality	:	Bangladeshi		
Insurance / Card#	:	E CARE - Blue Network / I040-029-113718537-01		
EMID #	:	784-1988-8652021-6		

Medical Record details

Complaints

Complaints

pc : severe headache which is 8 on pain score

sneezing ,nasal congestion , nasal bleed . causing difficulky in breathing started 17/04/25

mouth breathing only for few weeks , now congested sinusses, took paracetamol not improved

o/e : hyperemic pharynx

hyperemic nasal mucosa , swollen , congested

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 : 36.3 BPS : 70 BPD : Pulse : 70 Height : 162 cm Weight : 70 kg
BMI : 26.67276 bpm Respiratory : 20 bpm SpO2 : 98% Hip : cm Waist : cm

Head Circumference : cm
Urinalysis (Protein & Glucose) :
Notes : RISK OF FALL

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
22-Apr-2025	DR Amaizah	R06.2	Wheezing	
22-Apr-2025	DR Amaizah	R09.81	Nasal congestion	
22-Apr-2025	DR Amaizah	J30.9	Allergic rhinitis, unspecified	
22-Apr-2025	DR Amaizah	J02.9	Acute pharyngitis, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
NATAZONE / (MOMETASONE FUROATE (AS MONOHYDRATE) : 50 MCG/DOSE) SUSPENSION FOR NASAL SPRAY MOMETASONE FUROATE (AS MONOHYDRATE) [50 MCG/DOSE] / SUSPENSION FOR NASAL SPRAY (120 DOSE, METERED DOSE SPRAY) / Spray	Take 1Spray 2 Time(s) per Day For 7 Day(s) after meal	7	1	
GUPISONE 20MG / (PREDNISOLONE : 20 MG) TABLETS PREDNISOLONE [20 MG] / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) after meal	7	7	
PULMICORT 0.25MG/ML / (BUDESONIDE : 0.25 MG/ML) SUSPENSION FOR NEBULIZATION BUDESONIDE [0.25 MG/ML] / SUSPENSION FOR NEBULIZATION (2ML X 20, UNIT) / Solution	Take 1Solution 1 Time(s) per Day For 3 Day(s) others	3	3	

Doctor Signature & Stamp :

