

1.HealthNet Policy Number	1038-000- 116865645-01	2. Author Code:	ization
2.Patient Name	MORAD ACHETO	UI	
3.Patient Date of Birth & Sex	05-09-81(dd/mi	m/yy)	✓ Male ☐ Female
	Mobile No.055	9698843	
5.Nature of illness or Injury6.Are You the patient's primary physician7.Presenting Complaints:	☐ Acute ☐ Ch☐ Yes ☐ No	ronic 🗆	Emergency
C/o: Palpitation, weakness, anxiety and fear of closed spaces.			
Could not seat calm in the consulting room while the door was closed as he was so to him.	ared of someth	ing terri	ble happenin
He also had a similar episode a month ago during a flight when he became unnecclosed.	essarily scared t	that the	plane was
He likes to be alone by himself and away from people, and sad most times of the d	ay.		
Has a history of hypercholesterolemia, but not hypertensive and not diabetic.			
Smokes tobacco, but does not take alcohol and does not do drugs.			
There is also no history of hallucination of any type and he has no suicide ideation			
There is also no family history of mental issues nor depression.			
For the same reason, Ambulance was said to have been called for him earlier toda and did not do anything for him.	y but they came	and sai	d all was fine
Refer to psychiatrist.			
8. Duration of Symptoms:			
9.Onset of Condition:			
10.Relevent Past Medical/Surfgical History			
DiagonosisiAgoraphobia with panic disorder, Generalized anxiety disorder, Hyperlipidemia, unspecified	ICD Code F40.0	1, F41.1,	E78.5
12.Etiology:			
13.In case of Injury:mode of Injury/place of Injury			
14.Plan / Details of Management			
a.ProcedureBlood Count Complete Auto&Auto Difrntl Wbc Count,Lipid Panel,C-Reactive Protein,Office consultation for a new or established patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patients and/or familys needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 15 minutes face-to-face with the patient and/or family.,SICK LEAVE - 1 DHA	CPT code85025	,80061,8	6140,9,
b.Laboratiry Test:			
c.Radiology / Investigations:			

15.In Case of Hospitalization: Date of Addmission:

Date of Discharge:

16.

PRESCRIPTION WITH DOSAGE & DURATION						
Code	Generic	Dosage	Duration	Instructions		
0005-196701- 0391	(PROMETHAZINE : 25 MG) FILM COATED TABLETS	FILM COATED TABLETS (20S, BLISTER PACK)	5	Take 1Tablets 1 Time(s) per Day For 5 Day(s) evening		
1394-211703- 0391	(ATORVASTATIN : 20 MG) FILM COATED TABLETS	FILM COATED TABLETS (28S, BLISTER PACK)	28	Take 1Tablets 1 Time(s) per Day For 28 Day(s) evening		

Date: 09-04-24(dd/mm/yy)

Doctor's Name Enomen Goodluck

Physician Code DHA-P-28040827 HNM Code

Signature and Stamp





Authorization

I hereby authorize the Physician, Hospital or Pharmacy to file a claim for medical services on my behalf and I confirm that the above mentioned examination / investigation / therapy is given to me by the doctor. I hereby authorize any Hospital, Physician, Pharmacy or any other person who has provided medical services to me or my dependents to furnish NGI with any and all information with regard to any medical history, medical condition or medical services and copies of all medical and hospital records.

A Photocopy or teletax copy of this authorization shall be considered effective any valid as the original

Date: 09-04-24(dd/mm/yy) Signature of Insued / Claimint

Copy of NGI - Pharmacy

NATIONAL GENERAL INSURANCE CO. (P.J.S.C)

Health Vet

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