Patient details

Date	:	19-Aug-2024 / 5:45PM - 6:00PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	29337 / PHILIP SHIVERENJE AMIAMI
Mobile #	:	505654352
Gender / DOB/Age	:	Male / 28-Aug-1985
Nationality	:	Kenyan
Insurance / Card#	:	NGI - HN BASIC PLUS / I038-000-115298213-01
EMID #	:	784-1985-2058696-1

Photo Not Available

Medical Record details

Complaints

Complaints

co swelling of the big toe pain all around the area rash around the groin area 16th august 2024

oe

redness all around the bid toe pain on touch hot

chest is clear no added sounds

restless

painkiller spary done

Allergies

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

Vital Signs

Temperature	: 37.3	**BPS**	: 75	**BPD**	:	**Pulse**	: 80	**Height**	: 167 cm	**Weight**	: 80 kg
BMI	: 28.68514 bpm	**Respiratory**	: 22 bpm	**SpO2**	: 96%	**Hip**	: cm	**Waist**	: cm		
Head Circumference	:	cm									
Urinalysis (Protein & Glucose)	:										
Notes	: Risk of Fall										

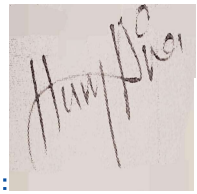
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
19-Aug-2024	Humaira	C84.00	Mycosis fungoides, unspecified site	
19-Aug-2024	Humaira	R52	Pain, unspecified	
19-Aug-2024	Humaira	L03.032	Cellulitis of left toe	
19-Aug-2024	Humaira	R50.9	Fever, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
OPIZOLE B / (BETAMETHASONE : N/A) (CLOTRIMAZOLE : N/A) CREAM TOPICAL / CREAM (20G, COLLAPSIBLE TUBE) / Cream	Take 1Cream 1 Time(s) per Day For 1 Day(s) others	1	1	
VOLTFAST / (DICLOFENAC POTASSIUM : 50 MG) POWDER FOR SOLUTION ORAL / POWDER FOR SOLUTION (30S, SACHET) / sachet	Take 1sachet 2 Time(s) per Day For 5 Day(s) others	5	10	
MIRAZOL / (METRONIDAZOLE : 500 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
CEROXIM / (CEFUROXIME : 500 MG) TABLETS ORAL / TABLETS (10S, FOIL STRIP) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	

Doctor Signature & Stamp :



Dr. Humaira Mumtaz
General Practitioner
DHA No: 54155530-002
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.