

**Patient details**

Date	:	24-Aug-2024 / 4:45PM - 5:00PM		
Doctor	:	AHSAN HUSSAIN(General)		
Reg # / Patient Name	:	43919 / NETHUM LAKVINDU RANATHUNGA RANATHUNGA ARACHCHCHILAGE		
Mobile #	:	0506751339		
Gender / DOB/Age	:	Male / 01-May-2002		
Nationality	:	Sri Lankan		
Insurance / Card#	:	NAS VN / AE44-CI4C-DCD4-CDEA		
EMID #	:	784-2002-4262141-3		

Medical Record details**Complaints****Complaints**

PC: FEVER

SORETHROAT

HEADACHE

VOMITING

Past / Family / Social History

Past History :

Other Past History :

Family History :
Social History - Smoking : No
Social History - Alcohol : No
Surgical History :

Vital Signs

Temperature : 36.6 **BPS** : 80 **BPD** : **Pulse** : 72 **Height** : 173 cm **Weight** : 63 kg
BMI : 21.04982 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
24-Aug-2024	AHSAN HUSSAIN	R11.2	Nausea with vomiting, unspecified	
24-Aug-2024	AHSAN HUSSAIN	R51.9	Headache, unspecified	
24-Aug-2024	AHSAN HUSSAIN	J00	Acute nasopharyngitis [common cold]	
24-Aug-2024	AHSAN HUSSAIN	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
PREMOSAN / (METOCLOPRAMIDE : 10 MG) TABLETS ORAL / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) before meal	7	14	
ADOL COLD & FLU DAY / (CAFFEINE ANHYDROUS : 25 MG) (PARACETAMOL : 500 MG) (PHENYLEPHRINE HCL : 5 MG) CAPLET-TABLET ORAL / CAPLET-TABLET (30S, BLISTER) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal	7	14	
Artiz / CETIRIZINE HCL 10mg / Tablet / Tablets	Take 1Tablets 1 Time(s) per Day For 5 Day(s) others BEFORE SLEEP	5	5	
ANAZOL / (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) after meal	7	14	



Doctor Signature & Stamp :