

**Patient details**

|                      |   |                                             |
|----------------------|---|---------------------------------------------|
| Date                 | : | 09-Sep-2024 / 7:15PM - 7:30PM               |
| Doctor               | : | Humaira(General)                            |
| Reg # / Patient Name | : | 28574 / ROSELINE AKINYI OJIEM               |
| Mobile #             | : | 507850395                                   |
| Gender / DOB/Age     | : | Female / 01-Jan-1985                        |
| Nationality          | : | Kenyan                                      |
| Insurance / Card#    | : | NGI - HN BASIC PLUS / I038-000-115298228-01 |
| EMID #               | : | 784-1984-0695185-9                          |

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

co skin infaction between the toes of both feet 1st sep. 2024

oe chest is clear no added sounds

restless

**Vital Signs**

|                                |                 |             |          |      |       |       |      |        |          |   |
|--------------------------------|-----------------|-------------|----------|------|-------|-------|------|--------|----------|---|
| Temperature                    | : 37.1          | BPS         | : 69     | BPD  | :     | Pulse | : 77 | Height | : 180 cm | W |
| BMI                            | : 33.95062 bpm  | Respiratory | : 18 bpm | SpO2 | : 99% | Hip   | : cm | Waist  | : cm     |   |
| Head Circumference             | :               |             | cm       |      |       |       |      |        |          |   |
| Urinalysis (Protein & Glucose) | :               |             |          |      |       |       |      |        |          |   |
| Notes                          | : RISK FOR FALL |             |          |      |       |       |      |        |          |   |

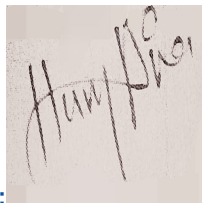
**Diagnosis**

| Date        | Doctor  | ICD Code | Diagnosis                           |
|-------------|---------|----------|-------------------------------------|
| 09-Sep-2024 | Humaira | C84.00   | Mycosis fungoides, unspecified site |
| 09-Sep-2024 | Humaira | L29.9    | Pruritus, unspecified               |

**Prescription**

| Generic/Dose/Form                                                                                                                        | Instructions                                           | Duration |
|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------|
| ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets                            | Take 1Tablets 1Time(s) perDay<br>For 5 Day(s) others   | 5        |
| KETODERM / (FLUCONAZOLE : 150 MG) CAPSULES (HARD GELATIN)<br>FLUCONAZOLE [150 MG] / CAPSULES (HARD GELATIN) (2S, BLISTER PACK) / Capsule | Take 1Capsule 1 Time(s) per<br>Day For 5 Day(s) others | 5        |
| LAMISIL / (TERBINAFINE (AS HCL) : 1%) CREAM TOPICAL / CREAM (15G, TUBE)<br>/ Cream                                                       | Take 1Cream 1Time(s) perDay<br>For 1 Day(s) others     | 1        |

Doctor Signature &amp; Stamp :



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

