Patient details

Date	:	12-Sep-2024 / 3:00PM - 3:15PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	39311 / DINNY IZATI
Mobile #	:	0553347051
Gender / DOB/Age	:	Female / 24-Feb-1984
Nationality	:	Indonesian
Insurance / Card#	:	E CARE - Green Network / I017-029-117650257-02
EMID #	:	784-1984-6371657-5

Medical Record details

Complaints

Complaints

co fever on and off headache dry cough while sneezing pee is coming 6th sep. 2024

oe

enlarge tonsills

chest is congested no added sounds

restless

h/f bronchitis on inhaler

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 Examina
		No Known Allergies	Unknown	

Vital Signs

Temperature	: 37.4	**BPS**	: 98	**BPD**	:	**Pulse**	: 94	**Height**	: 152 cm	V
BMI	: 29.43213 bpm	**Respiratory**	: 18 bpm	**SpO2**	: 99%	**Hip**	: cm	**Waist**	: cm	
Head Circumference		:	cm							
Urinalysis (Protein & Glucose)		:								
Notes	: risk for fall									

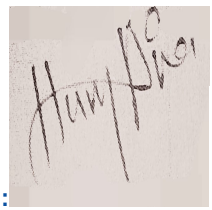
Diagnosis

Date	Doctor	ICD Code	Diagnosis
12-Sep-2024	Humaira	J30.9	Allergic rhinitis, unspecified
12-Sep-2024	Humaira	K29.00	Acute gastritis without bleeding
12-Sep-2024	Humaira	R05	Cough
12-Sep-2024	Humaira	J06.9	Acute upper respiratory infection, unspecified
12-Sep-2024	Humaira	R50.9	Fever, unspecified

Prescription

Generic/Dose/Form	Instructions	Duration
ZYNEX 20 / (ESOMEPRAZOLE (AS MAGNESIUM) : 20 MG) CAPSULES (HARD GELATIN) ORAL / CAPSULES (HARD GELATIN) (14S, BLISTER) / Capsule	Take 1Capsule 1 Time(s) per Day For 7 Day(s) others	7
EXYLIN / (AMMONIUM CHLORIDE : N/A) (MENTHOL : N/A) (DIPHENHYDRAMINE : 14 MG/5 ML) SYRUP ORAL / SYRUP (100ML, BOTTLE) / Syrup	Take 10ML 3 Time(s) per Day For 7 Day(s) after meal	1
ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS CAFFEINE/PARACETAMOL [65 MG|500 MG] / CAPLETS (24S, BOX) / Tablets	Take 1Tablets 2 Time(s) per Day For 6 Day(s) others	6
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS ORAL / TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS ORAL / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 5 Day(s) others	5

Doctor Signature & Stamp :



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