

**Patient details**

Date	:	14-Sep-2024 / 12:45PM - 1:00PM
Doctor	:	AHSAN HUSSAIN(General)
Reg # / Patient Name	:	37209 / DILAN SAMALKA SENANAYAKE KALUTARA KORALALAGE
Mobile #	:	0522946517
Gender / DOB/Age	:	Male / 18-Sep-1990
Nationality	:	Sri Lankan
Insurance / Card#	:	E CARE - Green Network / I017-029-117490343-02
EMID #	:	784-1990-6051037-9

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

PC: SORE THROAT
COUGH
FEVER
EPIGASTRIC PAIN

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 : 37.2 BPS : 77 BPD : Pulse : 90 Height : 187 cm
BMI : 28.02482 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
14-Sep-2024	AHSAN HUSSAIN	R10.13	Epigastric pain
14-Sep-2024	AHSAN HUSSAIN	R05	Cough
14-Sep-2024	AHSAN HUSSAIN	R51.9	Headache, unspecified
14-Sep-2024	AHSAN HUSSAIN	J00	Acute nasopharyngitis [common cold]
14-Sep-2024	AHSAN HUSSAIN	J06.9	Acute upper respiratory infection, unspecified

Prescription

Generic/Dose/Form	Instructions	Duration
KUFHETU ADULT COUGH SYRUP / (ADHATODA VASICA : 112.5 MG/10ML) (TULSI (OCIMUM SANCTUM) : 90MG/10ML) (SOLANUM XANTHOCARPUM : 90MG/10ML) (TERMINALIA BELLIRICA EXTRACT : 52.5 MG/10ML) (HEDYCHIUM SPICATUM : 37.5 MG/10ML) (GLYCYRRHIZA GLABRA EXTRACT : 22.5 MG/10ML) (PIPER LONGUM : 22.5 MG/10ML) SYRUP ORAL / SYRUP (200ML, BOTTLE) / Syrup	Take 5 ML Syrup 2 Time(s) per Day For 7 Day(s) others	7
XYLOLIN ADULT NASAL SPRAY / (XYLOMETAZOLINE HYDROCHLORIDE : 0.05%) LIQUID FOR SPRAY (NASAL) XYLOMETAZOLINE HYDROCHLORIDE [0.05%] / LIQUID FOR SPRAY (NASAL) (10ML, SPRAY BOTTLE) / Spray	Take 1Spray 2 Time(s) per Day For 7 Day(s) others	7
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS ORAL / TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal	7
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



Doctor Signature & Stamp :