



Patient details		
Date	:	09-Oct-2024 / 2:15PM - 2:30PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	44455 / DAINA MUENI MUENDO
Mobile #	:	0523836819
Gender / DOB/Age	:	Female / 31-Oct-1997
Nationality	:	Kenyan
Insurance / Card#	:	NEXTCARE -OP PCP / B648-1D82-60F9-E7E5
EMID #	:	784-1997-7423352-4

Medical Record details

Complaints

Complaints
co fever on and off headache and abdominal pain sep 2024 from one month
oe
epigastric pain
chest is clear no added sounds
restless

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 Examination
		No Known Allergies	Unknown	

Vital Signs

Temperature : 36.6 **BPS** : 68 **BPD** : **Pulse** : 72 **Height** : 160 cm **Weight** : 58 kg
BMI : 22.65625 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
09-Oct-2024	Humaira	E86.0	Dehydration	
09-Oct-2024	Humaira	R10.13	Epigastric pain	
09-Oct-2024	Humaira	R50.9	Fever, unspecified	
09-Oct-2024	Humaira	K29.00	Acute gastritis without bleeding	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
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 3 Day(s) others	3	6	
GAVISCON / (ALUMINIUM HYDROXIDE : N/A) (SODIUM BICARBONATE : N/A) (ALGINIC ACID : N/A) (MAGNESIUM TRISILICATE : N/A) CHEWABLE TABLETS ALUMINIUM HYDROXIDE/SODIUM BICARBONATE/ALGINIC ACID/MAGNESIUM TRISILICATE [N/A N/A N/A N/A] / CHEWABLE TABLETS (12S, BOX) / Tablets	Take 1Tablets 3 Time(s) per Day For 14 Day(s) others	14	42	
ZYNEX 20 / (ESOMEPRAZOLE (AS MAGNESIUM) : 20 MG) CAPSULES (HARD GELATIN) ESOMEPRAZOLE (AS MAGNESIUM) [20 MG] / CAPSULES (HARD GELATIN) (14S, BLISTER) / Tablets	Take 1Tablets 2 Time(s) per Day For 14 Day(s) others	14	28	
MIRAZOL / (METRONIDAZOLE : 500 MG) FILM COATED TABLETS METRONIDAZOLE [500 MG] / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
CLARITT XL / (CLARITHROMYCIN : 500 MG) EXTENDED RELEASE TABLETS CLARITHROMYCIN [500 MG] / EXTENDED RELEASE TABLETS (7S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7	7	

Doctor Signature & Stamp :


