



Patient details

|                      |   |                                              |
|----------------------|---|----------------------------------------------|
| Date                 | : | 13-Oct-2024 / 3:30PM - 3:45PM                |
| Doctor               | : | Humaira(General)                             |
| Reg # / Patient Name | : | 39385 / YAKUWA SARU MAGAR                    |
| Mobile #             | : | 0529099626                                   |
| Gender / DOB/Age     | : | Male / 11-Nov-1995                           |
| Nationality          | : | Nepalese                                     |
| Insurance / Card#    | : | FMC Standard Network / I019-010-119026412-01 |
| EMID #               | : | 784-1995-6135536-5                           |

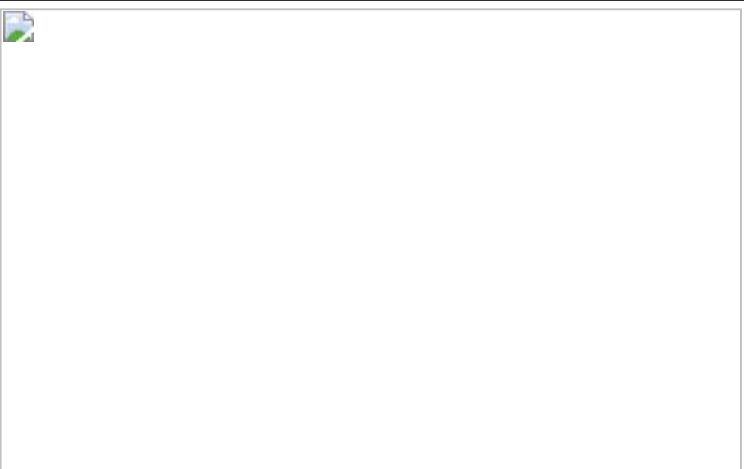


Photo  
Not  
Available

Medical Record details

Complaints

Complaints

co fever on and off taking tablet at home dry cough 7thoct 2024

oe

chest is wheezing

restless can not sleep properly

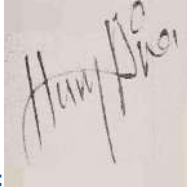
Diagnosis

| Date        | Doctor  | ICD Code | Diagnosis                                      | Notes |
|-------------|---------|----------|------------------------------------------------|-------|
| 13-Oct-2024 | Humaira | R05      | Cough                                          |       |
| 13-Oct-2024 | Humaira | K29.00   | Acute gastritis without bleeding               |       |
| 13-Oct-2024 | Humaira | R50.9    | Fever, unspecified                             |       |
| 13-Oct-2024 | Humaira | J30.9    | Allergic rhinitis, unspecified                 |       |
| 13-Oct-2024 | Humaira | J06.9    | Acute upper respiratory infection, unspecified |       |

Prescription

| Generic/Dose/Form                                                                                                                                                                                                                             | Instructions                                        | Duration | Quantity | Refill |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|----------|--------|
| STOPKOF (ALCOHOL FREE) / (AMMONIUM CHLORIDE : 131.5 MG/5 ML) (DIPHENHYDRAMINE HCL : 13.5 MG/5ML) SYRUP (ALCOHOL FREE) AMMONIUM CHLORIDE/DIPHENHYDRAMINE HCL [131.5 MG/5 ML  13.5 MG/5ML] / SYRUP (ALCOHOL FREE) (100ML, GLASS BOTTLE) / Syrup | Take 10ML 3 Time(s) per Day For 7 Day(s) after meal | 1        | 1        |        |
| ZYNEX 20 / (ESOMEPRAZOLE (AS MAGNESIUM) : 20 MG) CAPSULES (HARD GELATIN) ESOMEPRAZOLE (AS MAGNESIUM) [20 MG] / CAPSULES (HARD                                                                                                                 | Take 1Tablets 2 Time(s) per Day For                 | 7        | 14       |        |

| Generic/Dose/Form                                                                                                                                                  | Instructions                                              | Duration | Quantity | Refill |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|----------|----------|--------|
| GELATIN) (14S, BLISTER) / Tablets                                                                                                                                  | 7 Day(s) others                                           |          |          |        |
| ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS<br>CAFFEINE/PARACETAMOL [65 MG 500 MG] / CAPLETS (24S, BOX) / Tablets                               | Take 1Tablets 2<br>Time(s) per Day For<br>6 Day(s) others | 6        | 12       |        |
| GUPISONE 5MG / (PREDNISOLONE : 5 MG) TABLETS PREDNISOLONE [5 MG] /<br>TABLETS (20S, BLISTER PACK) / Tablets                                                        | Take 1Tablets 2<br>Time(s) per Day For<br>7 Day(s) others | 7        | 14       |        |
| ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG]<br>/ FILM COATED TABLETS (10S, BLISTER PACK) / Tablets                                 | Take 1Tablets at<br>night                                 | 10       | 10       |        |
| AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS<br>CLAVULANIC ACID/AMOXICILLIN [125 MG 875 MG] / TABLETS (14S, BLISTER PACK)<br>/ Tablets | Take 1 Unit(s), 2<br>Time(s) per Day For<br>7 Day(s)      | 7        | 1        |        |



Dr. Humaira Muntaz  
General Practitioner  
DHA No: 54155530-302  
CITICARE MEDICAL CENTER LLC  
DUBAI - U.A.E.



Doctor Signature & Stamp :