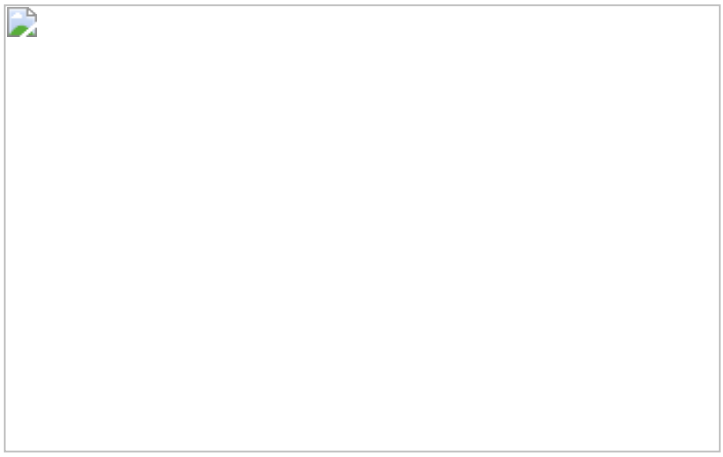
Patient details

Date	:	12-Nov-2024 / 8:00AM - 8:15AM
Doctor	:	AHSAN HUSSAIN(General)
Reg # / Patient Name	:	43743 / JAI ALEXANDER LUK PASZYC
Mobile #	:	0585328643
Gender / DOB/Age	:	Male / 07-Jul-1999
Nationality	:	United Nations
Insurance / Card#	:	NEXTCARE -OP PCP / E4D5-CD89-2AE9-72FF
EMID #	:	784-1999-6377997-2



Medical Record details

Complaints

Complaints

pc: fever 1 day

flu 1 day

headache

sorethroat

epigastric pain

low back pain

Vital Signs

Temperature	: 36.5	**BPS**	: 60	**BPD**	:	**Pulse**	: 86	**Height**	: 183 cm	**Weight**	: 79 kg
BMI	: 23.58984 bpm	**Respiratory**	: 18 bpm	**SpO2**	: 94%	**Hip**	: cm	**Waist**	: cm		
Head Circumference		:	cm								
Urinalysis (Protein & Glucose)		:									
Notes	: risk of fall										

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
12-Nov-2024	AHSAN HUSSAIN	J20.9	Acute bronchitis, unspecified	
12-Nov-2024	AHSAN HUSSAIN	M54.5	Low back pain	
12-Nov-2024	AHSAN HUSSAIN	K21.9	Gastro-esophageal reflux disease without esophagitis	
12-Nov-2024	AHSAN HUSSAIN	J06.9	Acute upper respiratory infection, unspecified	

Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
08:25:59	08:55:59	2190-106618-1001	PARAFUSIV I.V. 10MG/ML-(PARACETAMOL : 10 MG/ML) SOLUTION FOR INFUSION	NA	NA	iv slow
08:25:59	08:55:59	0005-174202-0781	RISEK 40MG	NA	NA	iv slow
00:00:00	00:00:00	96365	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour	NA	NA	
00:00:00	00:00:00	96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	NA	NA	
00:00:00	00:00:00	0188-135906-2441	PULMICORT	NA	NA	
00:00:00	00:00:00	94640	Pressurized or nonpressurized inhalation treatment for acute airway obstruction or for sputum induction for diagnostic purposes (eg, with an aerosol generator, nebulizer, metered dose inhaler or intermittent positive pressure breathing [IPPB] device)	NA	NA	
00:00:00	00:00:00	85025	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count	NA	NA	
00:00:00	00:00:00	86140	C-reactive protein;	NA	NA	
00:00:00	00:00:00	9	GP Consultation	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
SINECOD / (BUTAMIRATE DIHYDROGEN CITRATE : 0.15% W/V SYRUP ORAL / SYRUP (200ML, BOTTLE / Syrup	Take 1Syrup 2 Time(s) per Day For 7 Day(s) after meal	7	1	
FLUTAB / (DIPHENHYDRAMINE : 25 MG) (PARACETAMOL : 500 MG) (PSEUDOEPHEDRINE : 30 MG) FILM COATED TABLETS DIPHENHYDRAMINE/PARACETAMOL/PSEUDOEPHEDRINE [25 MG|500 MG|30 MG] / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2Time(s) perDay For 7 Day(s) after meal	7	14	
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG|875 MG] / TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7	7	

Doctor Signature & Stamp :