



Patient details

|                      |   |                                              |  |  |
|----------------------|---|----------------------------------------------|--|--|
| Date                 | : | 14-Nov-2024 / 11:45AM - 12:00PM              |  |  |
| Doctor               | : | Humaira(General)                             |  |  |
| Reg # / Patient Name | : | 35973 / ADEDOYIN DEBORAH ODUNTAN             |  |  |
| Mobile #             | : | 524383857                                    |  |  |
| Gender / DOB/Age     | : | Female / 31-Oct-1996                         |  |  |
| Nationality          | : | Nigerian                                     |  |  |
| Insurance / Card#    | : | FMC Standard Network / I019-010-116854773-01 |  |  |
| EMID #               | : | 784-1996-9372048-6                           |  |  |

Medical Record details

Complaints

Complaints

co fever headache half head h/f migrane dry cough nasal blockage 11th nov. 2024

oe chest is congested no added sounds

restless

Vital Signs

Temperature : 36.5      BPS : 70      BPD :      Pulse : 86      Height : 163 cm      Weight : 66.3 kg

BMI : 24.9539 bpm      Respiratory : 18 bpm      SpO2 : 99%      Hip : cm      Waist : cm

Head Circumference : cm

Urinalysis (Protein & Glucose) :

Notes : risk of fall

Diagnosis

| Date        | Doctor  | ICD Code | Diagnosis                        | Notes |
|-------------|---------|----------|----------------------------------|-------|
| 14-Nov-2024 | Humaira | K29.00   | Acute gastritis without bleeding |       |
| 14-Nov-2024 | Humaira | R05      | Cough                            |       |
| 14-Nov-2024 | Humaira | R50.9    | Fever, unspecified               |       |
| 14-Nov-2024 | Humaira | J30.9    | Allergic rhinitis, unspecified   |       |

| Date        | Doctor  | ICD Code | Diagnosis                                      | Notes |
|-------------|---------|----------|------------------------------------------------|-------|
| 14-Nov-2024 | Humaira | J06.9    | Acute upper respiratory infection, unspecified |       |

### Prescription

| Generic/Dose/Form                                                                                                                                                    | Instructions                                           | Duration | Quantity | Refill |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------|----------|--------|
| GERDIL 20 / (ESOMEPRAZOLE (AS MAGNESIUM) : 20 MG) DELAYED RELEASE CAPSULES ESOMEPRAZOLE (AS MAGNESIUM) [20 MG] / DELAYED RELEASE CAPSULES (30S, CONTAINER) / Capsule | Take 1Capsule 2 Time(s) per Day For 7 Day(s)<br>others | 7        | 14       |        |
| AMYDRAMINE - II / (DIPHENHYDRAMINE : 12.5 MG/5ML SYRUP (SUGAR FREE ORAL / SYRUP (SUGAR FREE (120ML, BOTTLE / Syrup                                                   | Take 10ML 3 Time(s) per Day For 7 Day(s)<br>others     | 1        | 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)<br>others | 6        | 12       |        |
| AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG 875 MG] / TABLETS (14S, BLISTER PACK) / Tablets         | Take 1Tablets 1 Time(s) per Day For 7 Day(s)<br>others | 7        | 7        |        |
| ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets                                      | Take 1Tablet at night                                  | 5        | 5        |        |

Doctor Signature & Stamp :


