



Patient details

Date	:	14-Nov-2024 / 6:00PM - 6:15PM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	44911 / SAMANTHA NDEBELE
Mobile #	:	0586917494
Gender / DOB/Age	:	Female / 04-Mar-1996
Nationality	:	Zimbabwean
Insurance / Card#	:	NEXTCARE -OP PCP / 6B95-9448-CB75-7624
EMID #	:	784-1996-9005591-0



Photo
Not
Available

Medical Record details

Complaints

Complaints

PC: pain in throat, cough and recurrent intermittent low grade fever.

Duration: 2days.

Also lacks appetite, nasal congestion and sneezing

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

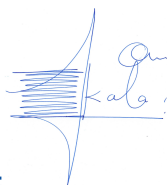
Temperature : 36.7 BPS : 100 BPD : Pulse : 74 Height : 167 cm Weight : 83 kg
BMI : 29.76084 bpm Respiratory : 18 bpm SpO2 : 99% Hip : cm Waist : cm
Head Circumference : cm
Urinalysis (Protein & Glucose) :
Notes : RISK FOR FALL

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
14-Nov-2024	Enomen Goodluck	R50.9	Fever, unspecified	
14-Nov-2024	Enomen Goodluck	J30.9	Allergic rhinitis, unspecified	
14-Nov-2024	Enomen Goodluck	J01.00	Acute maxillary sinusitis, unspecified	
14-Nov-2024	Enomen Goodluck	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
GUPISONE 5MG / (PREDNISOLONE : 5 MG TABLETS ORAL / TABLETS (20S, BLISTER PACK / Tablets	Take 2Tablets 1 Time(s) per Day For 7 Day(s) after meal	7	14	
SINECOD / (BUTAMIRATE DIHYDROGEN CITRATE : 0.15% W/V) SYRUP BUTAMIRATE DIHYDROGEN CITRATE [0.15% W/V] / SYRUP (200ML, BOTTLE) / ML	Take 10ML 3 Time(s) per Day For 7 Day(s) after meal	7	1	
MAXIGESIC / (IBUPROFEN : 150 MG (PARACETAMOL : 500 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (16S, BLISTER / Tablets	Take 1Tablets 3 Time(s) per Day For 5 Day(s) after meal	5	15	
FLUTAB / (DIPHENHYDRAMINE : 25 MG (PARACETAMOL : 500 MG (PSEUDOEPHEDRINE : 30 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK / Tablets	Take 1Tablets 2 Time(s) per Day For 10 Day(s) after meal	10	20	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 1Time(s) perDay For 10 Day(s) after meal	10	10	



Doctor Signature & Stamp :

Dr. Enomen Goodluck Ekata
General Practitioner
DHA No: 28040827-001
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.

