



Patient details

Date	:	28-Nov-2024 / 10:30PM - 10:45PM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	45057 / ALI HASSAN IBRAHIM KARAM HASSAN
Mobile #	:	0507742012
Gender / DOB/Age	:	Male / 05-Apr-2013
Nationality	:	Emirati
Insurance / Card#	:	NEXTCARE ENAYA / 6358-BE2D-B35A-BFED
EMID #	:	784-2013-7528548-9



Photo
Not
Available

Medical Record details

Complaints

Complaints

PC: Cough that is distressing and associated with vomiting, for which he has had over 4 episodes ttoday.
Duration: 1day (28/11/2024).

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 : 00 BPD : Pulse : 92 Height : 146 cm Weight : 33.6 kg
BMI : 15.76281 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
28-Nov-2024	Enomen Goodluck	R11.10	Vomiting, unspecified	
28-Nov-2024	Enomen Goodluck	R05	Cough	
28-Nov-2024	Enomen Goodluck	J03.90	Acute tonsillitis, unspecified	

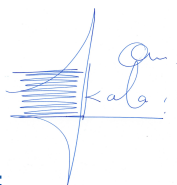
Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
00:00:00	00:00:00	9	Consultation GP	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
MUCUM / (AMBROXOL : 15 MG/5ML) SYRUP (SUGAR FREE) AMBROXOL [15 MG/5ML] / SYRUP (SUGAR FREE) (100ML, GLASS BOTTLE) / ML	Take 5ML 3 Time(s) per Day For 5 Day(s) after meal	5	1	
LORINASE / (LORATADINE : 5 MG/5ML (PSEUDOEPHEDRINE SULPHATE : 60MG/5 ML SYRUP ORAL / SYRUP (100ML, GLASS BOTTLE) / ML	Take 5ML 2 Time(s) per Day For 5 Day(s) after meal	5	1	
PREDO / (PREDNISOLONE : 3 MG/ML) SYRUP PREDNISOLONE [3 MG/ML] / SYRUP (120ML, GLASS BOTTLE) / ML	Take 5ML 1 Time(s) per Day For 5 Day(s) after meal	5	1	
IBULIFE / (IBUPROFEN : 100 MG/5ML) SUSPENSION IBUPROFEN [100 MG/5ML] / SUSPENSION (110ML, BOTTLE) / ML	Take 7.5ML 3 Time(s) per Day For 5 Day(s) after meal	5	1	
MAGNACEF 100MG/5ML / (CEFIXIME : 100 MG/5ML) POWDER FOR RECONSTITUTION CEFIXIME [100 MG/5ML] / POWDER FOR RECONSTITUTION (60ML , BOTTLE + SPOON) / ML	Take 12ML 1 Time(s) per Day For 5 Day(s) after meal	5	60	

Doctor Signature & Stamp :



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

