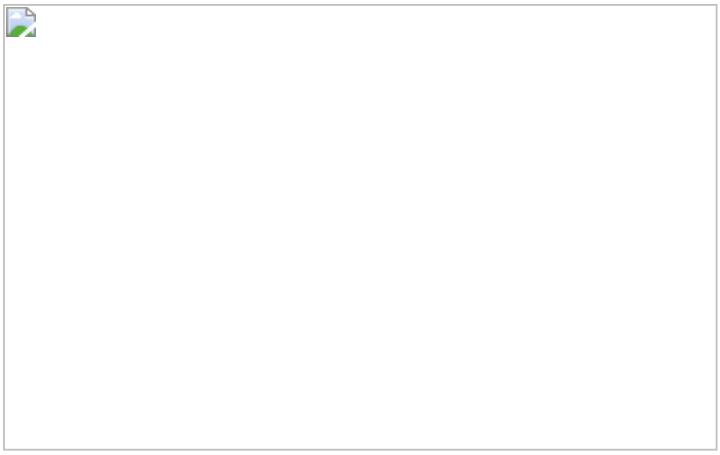
Patient details

Date	:	30-Nov-2024 / 1:00AM - 1:15AM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	45071 / TAMARA KOBAISSI KOBAISSI
Mobile #	:	000000000000
Gender / DOB/Age	:	Female / 31-Dec-1989
Nationality	:	Lebanese
Insurance / Card#	:	NEXTCARE CLAIMS MANAGEMENT LLC / DF1A-C6C3-3C15-22EA
EMID #	:	784-1989-7907286-9



Medical Record details

Complaints

Complaints

PC: Vomiting, diarrhea and vague lower abdominal pain.

Duration: `1 day

Said to have woken up with these symptoms plus severe dizziness.

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**	: 70	**BPD**	:	**Pulse**	: 88	**Height**	: 168 cm	**Weight**	: 55 kg
BMI	: 19.48696 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
30-Nov-2024	Enomen Goodluck	E86.0	Dehydration	
30-Nov-2024	Enomen Goodluck	R42	Dizziness and giddiness	
30-Nov-2024	Enomen Goodluck	R11.10	Vomiting, unspecified	
30-Nov-2024	Enomen Goodluck	K52.9	Noninfective gastroenteritis and colitis, unspecified	

Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
00:00:00	00:00:00	96360	Intravenous infusion, hydration; initial, 31 minutes to 1 hour	NA	NA	
00:00:00	00:00:00	0102-152902-1001	LACTATED RINGERS INJECTION USP	NA	NA	
00:00:00	00:00:00	0005-136504-1021	SCOPINAL	NA	NA	
00:00:00	00:00:00	9	GP Consultation	NA	NA	
00:00:00	00:00:00	96374	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); intravenous push, single or initial substance/drug	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ENTEROGERMINA / (SPORE OF BACILLUS CLAUSI : 2 BILLION/5ML) SUSPENSION SPORE OF BACILLUS CLAUSI [2 BILLION/5ML] / SUSPENSION (10 X 5ML, BOTTLE) / sachet	Take 1sachet 2 Time(s) per Day For 5 Day(s) others	5	10	
ORS / (ORAL REHYDRATION SALTS (O.R.S.) : N/A) ORAL POWDER ORAL REHYDRATION SALTS (O.R.S.) [N/A] / ORAL POWDER (30G X 25, SACHET) / Tablets	Take 1Tablets 1 Time(s) per Day For 3 Day(s) others	3	3	

Doctor Signature & Stamp :

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