



| Patient details      |   |                                              |
|----------------------|---|----------------------------------------------|
| Date                 | : | 07-Dec-2024 / 10:00AM - 10:15AM              |
| Doctor               | : | AHSAN HUSSAIN(General)                       |
| Reg # / Patient Name | : | 32242 / AARIF NIZAM MD NIZAMUDDIN            |
| Mobile #             | : | 0558635120                                   |
| Gender / DOB/Age     | : | Male / 24-Jun-1996                           |
| Nationality          | : | Indian                                       |
| Insurance / Card#    | : | FMC Standard Network / I019-010-116854774-01 |
| EMID #               | : | 784-1996-7314941-7                           |



Photo Not Available

Medical Record details

Complaints

| Complaints           |
|----------------------|
| pc: fever 06/12/2024 |
| flu                  |
| cough                |
| sore throat          |
| epigastric pain      |

Vital Signs

|                                |                |             |          |      |       |       |      |        |          |        |         |
|--------------------------------|----------------|-------------|----------|------|-------|-------|------|--------|----------|--------|---------|
| Temperature                    | : 36.4         | BPS         | : 62     | BPD  | :     | Pulse | : 72 | Height | : 173 cm | Weight | : 54 kg |
| BMI                            | : 18.0427 bpm  | Respiratory | : 18 bpm | SpO2 | : 97% | Hip   | : cm | Waist  | : cm     |        |         |
| Head Circumference             | :              |             | cm       |      |       |       |      |        |          |        |         |
| Urinalysis (Protein & Glucose) | :              |             |          |      |       |       |      |        |          |        |         |
| Notes                          | : RISK OF FALL |             |          |      |       |       |      |        |          |        |         |

Diagnosis

| Date        | Doctor        | ICD Code | Diagnosis                                            | Notes |
|-------------|---------------|----------|------------------------------------------------------|-------|
| 07-Dec-2024 | AHSAN HUSSAIN | K21.9    | Gastro-esophageal reflux disease without esophagitis |       |
| 07-Dec-2024 | AHSAN HUSSAIN | M54.5    | Low back pain                                        |       |
| 07-Dec-2024 | AHSAN HUSSAIN | J20.9    | Acute bronchitis, unspecified                        |       |
| 07-Dec-2024 | AHSAN HUSSAIN | J00      | Acute nasopharyngitis [common cold]                  |       |
| 07-Dec-2024 | AHSAN HUSSAIN | J06.9    | Acute upper respiratory infection, unspecified       |       |

**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<br>DIPHENHYDRAMINE/PARACETAMOL/PSEUDOEPHEDRINE [25 MG/500 MG/30 MG] / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets | Take 1Tablets 2 Time(s) per Day 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) after meal | 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 5 Day(s) others     | 5        | 5        |        |


**Doctor Signature & Stamp :**