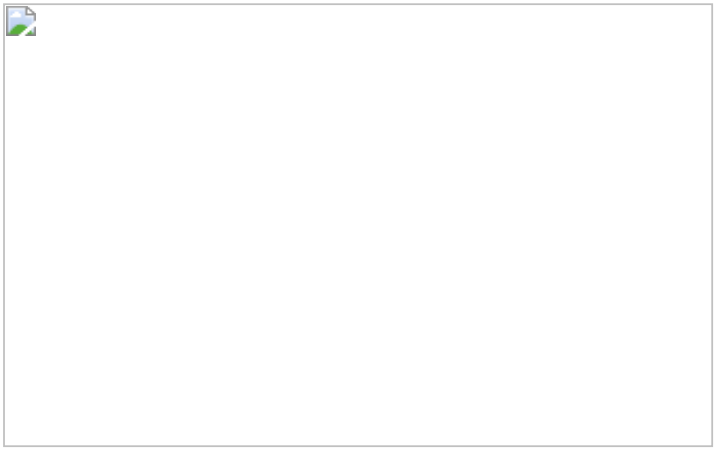
Patient details

Date	:	07-Dec-2024 / 11:30PM - 11:45PM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	45148 / Yelyzaveta Cherevko
Mobile #	:	0553455631
Gender / DOB/Age	:	Female / 16-May-2003
Nationality	:	Ukrainian
Insurance / Card#	:	NEXTCARE -RN / B384-F17D-6AA9-73BE
EMID #	:	784-2003-9460468-8



Medical Record details

Complaints

Complaints

Swelling and pain on both big toes.

infected and oozing pus

Duration: 2weeks

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	: 36.8	**BPS**	: 70	**BPD**	:	**Pulse**	: 78	**Height**	: 162 cm	**Weight**	: 58 kg
BMI	: 22.10029 bpm	**Respiratory**	: 18 bpm	**SpO2**	: 98%	**Hip**	: cm	**Waist**	: cm		
Head Circumference	:	cm									
Urinalysis (Protein & Glucose)	:										
Notes	: RISK FOR FALL										

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
07-Dec-2024	Enomen Goodluck	R52	Pain, unspecified	
07-Dec-2024	Enomen Goodluck	L03.032	Cellulitis of left toe	
07-Dec-2024	Enomen Goodluck	L03.031	Cellulitis of right toe	

Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
00:00:00	00:00:00	11750	Excision of nail and nail matrix, partial or complete (eg, ingrown or deformed nail), for permanent removal;	NA	NA	
00:00:00	00:00:00	96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	NA	NA	
00:00:00	00:00:00	0005-149902-1021	CLOFEN	NA	NA	IM stat
00:00:00	00:00:00	0195-107704-0801	CEFTRIAXONE-TABUK IV	NA	NA	IV infusion over 30mins.
00:00:00	00:00:00	INJ017	INJ-TETANUS TOXOID			
00:00:00	00:00:00	96372	INJECTION SERVICE-IM			
00:00:00	00:00:00	9	GP Consultation	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ADOL / (PARACETAMOL : 500 MG TABLETS ORAL / TABLETS (20S, BLISTER PACK / Tablets	Take 1Tablets 3 Time(s) per Day For 4 Day(s) after meal	4	12	
CATAFLAM / (DICLOFENAC POTASSIUM : 50 MG) SUGAR COATED TABLETS DICLOFENAC POTASSIUM [50 MG] / SUGAR COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) after meal	5	10	
AUGMENTIN 625MG / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 500 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG|500 MG] / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2Time(s) perDay For 10 Day(s) after meal	10	20	

Doctor Signature & Stamp :

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