



## Patient details

|                            |   |                                  |
|----------------------------|---|----------------------------------|
| Date                       | : | 10-Dec-2024 /<br>5:45PM - 6:00PM |
| Doctor                     | : | Enomen<br>Goodluck(General)      |
| Reg # /<br>Patient<br>Name | : | 40053 / CYLIA<br>LAKHDARI        |
| Mobile #                   | : | 0557130227                       |
| Gender /<br>DOB/Age        | : | Female / 17-Oct-<br>1996         |
| Nationality                | : | Algerian                         |
| Insurance<br>/ Card#       | : | NAS VN / C4RG-<br>AICC-DCD2-IDEA |
| EMID #                     | : | 784-1996-<br>1080692-1           |



Photo  
Not  
Available

## Medical Record details

## Complaints

|                                                       |
|-------------------------------------------------------|
| PC: Generalized body pains, pain in throat and fever. |
| Duration: 1day                                        |
| There is no cough.                                    |
| Does not smoke tobacco.                               |
| not hypertensive and not diabetic.                    |

## Vital Signs

|                                |                |             |          |      |       |       |      |        |          |        |         |
|--------------------------------|----------------|-------------|----------|------|-------|-------|------|--------|----------|--------|---------|
| Temperature                    | : 37           | BPS         | : 75     | BPD  | :     | Pulse | : 86 | Height | : 165 cm | Weight | : 56 kg |
| BMI                            | : 20.56933 bpm | Respiratory | : 18 bpm | SpO2 | : 98% | Hip   | : cm | Waist  | : cm     |        |         |
| Head Circumference             | :              |             | cm       |      |       |       |      |        |          |        |         |
| Urinalysis (Protein & Glucose) | :              |             |          |      |       |       |      |        |          |        |         |
| Notes                          | : RISK OF FALL |             |          |      |       |       |      |        |          |        |         |

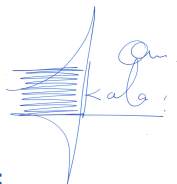
## Diagnosis

| Date        | Doctor             | ICD Code | Diagnosis                                      | Notes |
|-------------|--------------------|----------|------------------------------------------------|-------|
| 10-Dec-2024 | Enomen<br>Goodluck | R07.0    | Pain in throat                                 |       |
| 10-Dec-2024 | Enomen<br>Goodluck | R50.9    | Fever, unspecified                             |       |
| 10-Dec-2024 | Enomen<br>Goodluck | J06.9    | Acute upper respiratory infection, unspecified |       |

## Prescription

| Generic/Dose/Form                                                                                                                 | Instructions                                               | Duration | Quantity | Refill |
|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------|----------|--------|
| MACROMAX 500 / (AZITHROMYCIN : 500 MG) FILM COATED TABLETS<br>AZITHROMYCIN [500 MG] / FILM COATED TABLETS (6S, BLISTER) / Tablets | Take 1Tablets 1 Time(s) per<br>Day For 5 Day(s) after meal | 5        | 5        |        |

| 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       |        |
| MAXIGESIC / (IBUPROFEN : 150 MG (PARACETAMOL : 500 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (16S, BLISTER / Tablets | Take 2Tablets 2 Time(s) per Day For 4 Day(s) after meal | 4        | 16       |        |
| LORINASE / (LORATADINE : 5 MG (PSEUDOEPHEDRINE SULPHATE : 120 MG TABLETS ORAL / TABLETS (14S, BLISTER PACK / Tablets         | Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal | 7        | 14       |        |



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



Doctor Signature & Stamp :