



Patient

44740

AIZAZ AHMAD ILYAS KHAN

784-2004-6737199-1

Repeat

20

Male

Pakistani

U

NGI - HN BASIC PLUS - NGI - Default Scheme (99999)

Medical History (patient\_history.aspx?patId=54777)

Billing History (patient\_accounts.aspx?patId=54777)

Appointment

Visit ID 55822

11-Dec-2024

Humaira - General - DHA-P-54155530

MRN Activities(Log)

Insurance Cards

EMID Card

Vitals Alert

This Patient has Vitals for Temp: 36°C, Pulse: 55bpm, BP: 122mmHg, Height: 160cm, Weight: 52kg, BMI 20.31(Obese), Blood Sugar

- Start Time
- Nurse Station
- Doctor Evaluation
- Orthopedic Case Assessment
- Diagnosis
- Treatments/Procedures
- Packages
- Prescription
- Reimbursement Forms
- Documents
- Progress Notes
- Addendum
- NGI Form
- NGI Claim Form
- Other Forms
- Sick Leave
- End Time
- Visit Summary Sheet
- Nabidh Clinical Docs
- Audit Log
- Radiology
- Laboratory
- Health Declaration
- Signed Documents
- Image Comparison

☐Space Loss :#

Enter Text

☐Appliance in use

Enter Text

☐Overjet

Enter Text

☐Overbite

Enter Text

☐Openbite

Enter Text

MIDLINE

☐Even

☐Shift to R☐Upper☐Lower

☐Shift to L☐Upper☐Lower

CROSSBITE

☐None

☐Present:#

Enter Text

TRAUMA:

☐None☐Yes(teeth Involved)

Enter Text

| Diagnosis |        |          |           |
|-----------|--------|----------|-----------|
| Date      | Doctor | ICD Code | Diagnosis |

|             |         |        |                                                |
|-------------|---------|--------|------------------------------------------------|
| 11-Dec-2024 | Humaira | K29.00 | Acute gastritis without bleeding               |
| 11-Dec-2024 | Humaira | R50.9  | Fever, unspecified                             |
| 11-Dec-2024 | Humaira | J30.9  | Allergic rhinitis, unspecified                 |
| 11-Dec-2024 | Humaira | J06.9  | Acute upper respiratory infection, unspecified |

## **Prescription**

| Generic/Dose/Form                                                                                                                                            | Instructions                                        | Duration |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|
| GERDIL 20 / (ESOMEPRAZOLE (AS MAGNESIUM : 20 MG DELAYED RELEASE CAPSULES ORAL / DELAYED RELEASE CAPSULES (30S, CONTAINER / Capsule                           | Take 1Capsule 2 Time(s) per Day For 7 Day(s) others | 7        |
| ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS CAFFEINE/PARACETAMOL [65 MG 500 MG] / CAPLETS (24S, BOX) / Tablets                            | Take 1Tablets 2 Time(s) per Day For 6 Day(s) others | 6        |
| AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG 875 MG] / TABLETS (14S, BLISTER PACK) / Tablets | Take 1Tablets 1 Time(s) per Day For 7 Day(s) others | 7        |