



Patient details

Date	:	15-Dec-2024 / 5:30PM - 5:45PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	41173 / AYMAN KHAN KHALID AKHTAR KHAN
Mobile #	:	00917412838122
Gender / DOB/Age	:	Female / 29-Dec-1994
Nationality	:	Indian
Insurance / Card#	:	FMC Standard Network / I005-010-119448897-01
EMID #	:	784-1994-1026439-6



Medical Record details

Complaints

Complaints

co fever on and off diarrhoea 5 times nausea 13th dec. 2024

oe chest is clear no added sound

restless

smoker

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 : 90 BPD : Pulse : 90 Height : 160 cm Weight : 117 kg

BMI : 45.70313 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
15-Dec-2024	Humaira	R50.9	Fever, unspecified	
15-Dec-2024	Humaira	R11.0	Nausea	
15-Dec-2024	Humaira	R19.7	Diarrhea, unspecified	
15-Dec-2024	Humaira	K52.9	Noninfective gastroenteritis and colitis, unspecified	

Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
06:00:00	06:45:00	0148-116601-1001	(METRONIDAZOLE : 500 MG/100ML) SOLUTION FOR INFUSION	NA	NA	iv infusion
05:42:00	06:00:00	0005-150403-1021	PREMOSAN -(METOCLOPRAMIDE : 10 MG/2ML) SOLUTION FOR INJECTION	NA	NA	iv push
17:40:36	05:42:00	0005-136504-1021	SCOPINAL-(HYOSCINE : 20 MG/ML) SOLUTION FOR INJECTION	NA	NA	im
17:40:36	05:42:00	96372	THER/PROPH/DIAG INJ SC/IM	NA	NA	
00:00:00	00:00:00	9	Consultation Gp	NA	NA	
00:00:00	00:00:00	96375	TX/PRO/DX INJ NEW DRUG ADDON	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ENTEROGERMINA / (SPORE OF BACILLUS CLAUSI : 2 BILLION) CAPSULES (HARD GELATIN) SPORE OF BACILLUS CLAUSI [2 BILLION] / CAPSULES (HARD GELATIN) (12S, BLISTER) / Capsule	Take 1Capsule 3 Time(s) per Day For 7 Day(s) others	7	21	
SCOPINAL / (HYOSCINE : 10 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (1000S, BLISTER PACK / Tablets	Take 1Tablet as per need	3	6	
APEX 400 MG / (CEFEXIME : 400 MG) CAPSULES CEFEXIME [400 MG] / CAPSULES (6S, BLISTER) / Capsule	Take 1Capsule 2 Time(s) per Day For 7 Day(s) others	7	14	
MIRAZOL / (METRONIDAZOLE : 500 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	

Doctor Signature & Stamp :


