Patient details

Date	:	15-Dec-2024 / 6:15PM - 6:30PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	37865 / RASHID HUSSAIN HUSSAIN ALI
Mobile #	:	0502443645
Gender / DOB/Age	:	Male / 01-Jan-1982
Nationality	:	Pakistani
Insurance / Card#	:	FMC Standard Network / I019-010-117606895-02
EMID #	:	784-1982-5941713-1

Medical Record details

Complaints

Complaints

co skin allergy fever pain in throat 12th dec. 2024

oe

chest is congested no added sounds

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**	: 80	**BPD**	:	**Pulse**	: 88	**Height**	: 169 cm	**Weight**	: 82 kg
BMI	: 28.71048 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	K29.00	Acute gastritis without bleeding	
15-Dec-2024	Humaira	T78.40XA	Allergy, unspecified, initial encounter	
15-Dec-2024	Humaira	R21	Rash and other nonspecific skin eruption	
15-Dec-2024	Humaira	J02.9	Acute pharyngitis, unspecified	

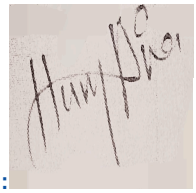
Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
00:00:00	00:00:00	96372	THER/PROPH/DIAG INJ SC/IM	NA	NA	
00:00:00	00:00:00	9	Consultation Gp	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablet at night	5	5	
LAMISIL / (TERBINAFINE (AS HCL) : 1%) CREAM TERBINAFINE (AS HCL) [1%] / CREAM (15G, TUBE) / Cream	Take 1Cream 1Time(s) perDay For 1 Day(s) others	1	1	
DURACAN / (FLUCONAZOLE : 150 MG CAPSULES (HARD GELATIN ORAL / CAPSULES (HARD GELATIN (1S, BLISTER PACK / Capsule	Take 1Capsule 1 Time(s) per Week For 5 Day(s) others	5	5	
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	12	
MACROMAX 500 / (AZITHROMYCIN : 500 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (3S, BLISTER / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7	7	

Doctor Signature & Stamp :



Dr. Humaira Mumtaz
General Practitioner
DHA No: 54155530-002
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DUBAI - U.A.E.