



Patient details

Date	:	17-Dec-2024 / 10:00AM - 10:15AM		
Doctor	:	Humaira(General)		
Reg # / Patient Name	:	45242 / MADAN PRASAD MANGAL PRASAD		
Mobile #	:	971588000366		
Gender / DOB/Age	:	Male / 28-Mar-1987		
Nationality	:	Indian		
Insurance / Card#	:	NAS - RN,RN+ / RIAG-4G4C-DCD4-EDEA		
EMID #	:	784-1987-0305806-9		

Medical Record details

Complaints

Complaints

co fever on and off dry cough pain in throat 13th dec. 2024

oe chest is wheezing

restless

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** : 100 **BPD** : **Pulse** : 88 **Height** : 172 cm **Weight** : 92 kg

BMI : 31.09789 bpm **Respiratory** : 18 bpm **SpO2** : 98% **Hip** : cm **Waist** : cm

Head Circumference :

Urinalysis (Protein & Glucose) :

Notes : RISK FOR FALL

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
17-Dec-2024	Humaira	K29.00	Acute gastritis without bleeding	
17-Dec-2024	Humaira	R50.9	Fever, unspecified	
17-Dec-2024	Humaira	R05	Cough	
17-Dec-2024	Humaira	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ZEAL SF / (TRIKATU : 2.5 MG/5 ML) (ADHATODA VASICA : 20 MG/5ML) (GLYCYRRHIZA GLABRA : 20 MG/5ML) (ZINGIBER OFFICINALE : 5 MG/5ML) (OCIMUM SANCTUM : 20 MG/5ML) (SOLANUM XANTHOCARPUM : 6.25MG/5ML) (MENTHA SYLVESTRIS : 3 MG/5ML) SYRUP TRIKATU/ADHATODA VASICA/GLYCYRRHIZA GLABRA/ZINGIBER OFFICINALE/OCIMUM SANCTUM/SOLANUM XANTHOCARPUM/MENTHA SYLVESTRIS [2.5 MG/5 ML I20 MG/5MLI20 MG/5MLI5 MG/5MLI20 MG/5MLI6.25MG/5MLI3 MG/5ML] / SYRUP (100ML, PLASTIC BOTTLE) / Syrup	Take 10 ml 3 times in a day	1	1	
ZYNEX 20 / (ESOMEPRAZOLE (AS MAGNESIUM : 20 MG CAPSULES (HARD GELATIN ORAL / CAPSULES (HARD GELATIN (14S, BLISTER / Capsule	Take 1Capsule 2 Time(s) per Day For 7 Day(s) others	7	14	
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	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	12	
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	

Doctor Signature & Stamp :


