Patient details

Date	:	25-Dec-2024 / 11:45AM - 12:00PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	45043 / VIGNESHKUMAR LAKSHMANAN LAKSHMANAN
Mobile #	:	0523864580
Gender / DOB/Age	:	Male / 23-Jan-1994
Nationality	:	Indian
Insurance / Card#	:	E CARE - Blue Network / I005-029-119704083-01
EMID #	:	784-1994-1297541-1

Photo Not Available

Medical Record details

Complaints

Complaints

co nail ingron pus is coming 15th dec.20-24

oe chest is clear no added sounds

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**	: 60	**BPD**	:	**Pulse**	: 78	**Height**	: 172 cm	**Weight**	: 58 kg
BMI	: 19.60519 bpm	**Respiratory**	: 18 bpm	**SpO2**	: 99%	**Hip**	: cm	**Waist**	: cm		
Head Circumference	:	cm									
Urinalysis (Protein & Glucose)	:										
Notes	: RISK FOR FALL										

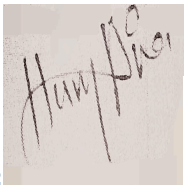
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
25-Dec-2024	Humaira	R52	Pain, unspecified	
25-Dec-2024	Humaira	R50.9	Fever, unspecified	
25-Dec-2024	Humaira	L02.91	Cutaneous abscess, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
BETADINE OINTMENT / (POVIDONE IODINE : 10%) OINTMENT POVIDONE IODINE [10%] / OINTMENT (40G, TUBE) / Ointment	Take 1Ointment 1Time(s) perDay For 1 Day(s) others	1	1	
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	
AUGMENTIN 625MG / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 500 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG|500 MG] / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
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	

Doctor Signature & Stamp :



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