



Patient details

Date	:	30-Dec-2024 / 1:30AM - 1:45AM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	44646 / AIYSHA ABDUL GAFFAR
Mobile #	:	0559951783
Gender / DOB/Age	:	Female / 25-Jul-2003
Nationality	:	Indian
Insurance / Card#	:	FMC Standard Network / I005-010-121540490-01
EMID #	:	784-2003-9686024-7



Photo
Not
Available

Medical Record details

Complaints

Complaints

PC: Intermittent fever, cough and lower abdominal pain,
Duration: 3days
associated vomiting, bilateral lumbar pain
does not smoke and does not take alcohol
not hypertensive and not diabetic.

Allergies

Allergy Type	Allergy Severity	Allergies	Allergy For	Physical Examination
		No Known Allergies	Unknown	

Vital Signs

Temperature : 36.9 BPS : 80 BPD : Pulse : 74 Height : 160 cm Weight : 75 kg
BMI : 29.29688 bpm Respiratory : 18 bpm SpO2 : 98% Hip : cm Waist : cm
Head Circumference : cm
Urinalysis (Protein & Glucose) :
Notes : RISK FOR FALL

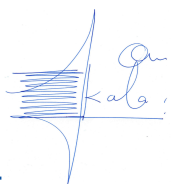
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
30-Dec-2024	Enomen Goodluck	K29.70	Gastritis, unspecified, without bleeding	
30-Dec-2024	Enomen Goodluck	M79.10	Myalgia, unspecified site	

Date	Doctor	ICD Code	Diagnosis	Notes
30-Dec-2024	Enomen Goodluck	R50.9	Fever, unspecified	
30-Dec-2024	Enomen Goodluck	J06.9	Acute upper respiratory infection, unspecified	
30-Dec-2024	Enomen Goodluck	N10	Acute pyelonephritis	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
GUPISONE 5MG / (PREDNISOLONE : 5 MG TABLETS ORAL / TABLETS (20S, BLISTER PACK / Tablets	Take 2Tablets 1 Time(s) per Day For 7 Day(s) others	7	14	
MUCUM / (AMBROXOL : 15 MG/5ML) SYRUP (SUGAR FREE) AMBROXOL [15 MG/5ML] / SYRUP (SUGAR FREE) (100ML, GLASS BOTTLE) / ML	Take 10ML 2Time(s) perDay For 7 Day(s) after meal	7	1	
NEXIUM / (ESOMEPRAZOLE : 40 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (14S, BLISTER PACK / Tablets	Take 1Tablets 1Time(s) perDay For 14 Day(s) before meal	14	14	
IBULIFE 400 / (IBUPROFEN : 400 MG TABLETS ORAL / TABLETS (24S, BLISTER PACK / Tablets	Take 1Tablets 2 Time(s) per Day For 4 Day(s) after meal	4	8	
CIPROBAY / (CIPROFLOXACIN : 500 MG) FILM COATED TABLETS CIPROFLOXACIN [500 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) after meal	5	10	
LORINASE / (LORATADINE : 5 MG) (PSEUDOEPHEDRINE SULPHATE : 120 MG) TABLETS LORATADINE/PSEUDOEPHEDRINE SULPHATE [5 MG 120 MG] / TABLETS (14S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) after meal	7	14	



Dr. Enomen Goodluck Ekata
General Practitioner
DHA No: 28040827-001
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.



Doctor Signaption & Stamp :