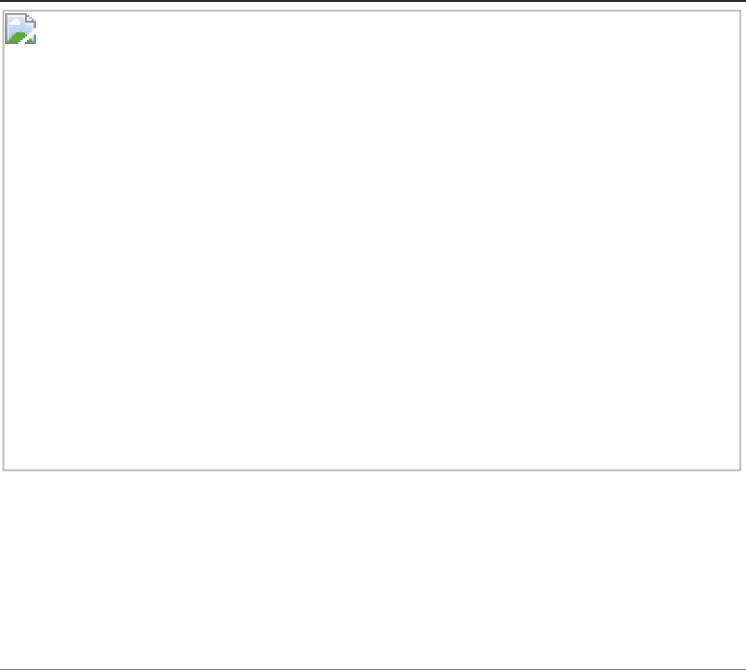




Patient details

Date	:	01-Jan-2025 / 2:30PM - 2:45PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	40974 / MERCY MBINYA MUMO
Mobile #	:	0522854153
Gender / DOB/Age	:	Female / 16-May-1994
Nationality	:	Kenyan
Insurance / Card#	:	NAS VN / CCIG-1E4C-DCDG-GDEA
EMID #	:	784-1994-3735310-7



Medical Record details

Complaints

Complaints

co fever back pain headache pain in throat dry cough 30th dec. 2024

oe chest is congested 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	Other	PANADOL

Vital Signs

Temperature : 36.6 BPS : 72 BPD : Pulse : 76 Height : 160 cm Weight : 86 kg

BMI : 33.59375 bpm Respiratory : 18 bpm SpO2 : 97% Hip : cm Waist : cm

Head Circumference : cm

Urinalysis (Protein & Glucose) :

Notes : risk for fall

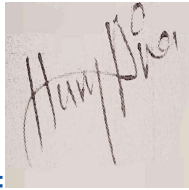
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
01-Jan-2025	Humaira	K29.00	Acute gastritis without bleeding	
01-Jan-2025	Humaira	R50.9	Fever, unspecified	
01-Jan-2025	Humaira	R05	Cough	
01-Jan-2025	Humaira	J30.9	Allergic rhinitis, unspecified	
01-Jan-2025	Humaira	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
AMYDRAMINE - II / (DIPHENHYDRAMINE : 12.5 MG/5ML SYRUP (SUGAR FREE ORAL / SYRUP (SUGAR FREE (120ML, BOTTLE / Syrup	Take 10ml 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 1 Capsule 2 Time(s) per Day For 7 Day(s) others	7	14	
BRUFEN 400MG / (IBUPROFEN : 400 MG) FILM COATED TABLETS IBUPROFEN [400 MG] / FILM COATED TABLETS (30S, BLISTER PACK) / Tablets	Take 1 Tablets 2 Time(s) per Day For 5 Day(s) others	5	10	
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG 875 MG] / TABLETS (14S, BLISTER PACK) / Tablets	Take 1 Tablets 1 Time(s) per Day For 7 Day(s) others	7	7	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1 Tablet at night	5	5	

Doctor Signature & Stamp :



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

