



Patient details

Date	:	01-Jan-2025 / 4:30PM - 4:45PM		Photo Not Available
Doctor	:	Humaira(General)		
Reg # / Patient Name	:	40172 / AREEBA AFTAB MUHAMMAD ALI FAROOQ		
Mobile #	:	0582937187		
Gender / DOB/Age	:	Female / 19-Mar-1999		
Nationality	:	Pakistani		
Insurance / Card#	:	NEXTCARE -OP PCP / F8A2-7B44-BC32-871E		
EMID #	:	784-1999-6072917-8		

Medical Record details

Complaints

co fever vomiting at night pain in throat nasal congestion 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	Unknown	

Vital Signs

Temperature	:	37.8	BPS	:	70	BPD	:	Pulse	:	97	Height	:	147 cm	Weight	:	81 kg
BMI	:	37.48438 bpm	Respiratory	:	18 bpm	SpO2	:	99%	Hip	:	cm	Waist	:	cm		
Head Circumference	:			:	cm											
Urinalysis (Protein & Glucose)	:			:												
Notes	:	RISK OF FALL														

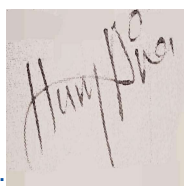
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
01-Jan-2025	Humaira	K29.00	Acute gastritis without bleeding	
01-Jan-2025	Humaira	R05	Cough	
01-Jan-2025	Humaira	R50.9	Fever, unspecified	
01-Jan-2025	Humaira	J02.9	Acute pharyngitis, unspecified	
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 10 ml 3 times in a day	1	1	
ADOL EXTRA / (CAFFEINE : 65 MG (PARACETAMOL : 500 MG CAPLETS ORAL / CAPLETS (24S, BOX / Tablets	Take 1Tablets 2 Time(s) per Day For 6 Day(s) others	6	12	
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	
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	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablet at night	10	10	

Doctor Signature & Stamp :



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

