Patient details

Date	:	04-Jan-2025 / 4:30PM - 4:45PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	39786 / PRIYA SAHU ARUN KUMAR SAHU
Mobile #	:	+919630911307
Gender / DOB/Age	:	Female / 13-Sep-1997
Nationality	:	Indian
Insurance / Card#	:	FMC Standard Network / I005-010-118997977-01
EMID #	:	784-1997-2652787-4

Medical Record details

Complaints

Complaints

pc ; itching and irritation , around rt upper eye lid , started 2 weeks ago , gradually worsening not taken any meds

o/e swollen ,reddish dry rt upper eyelid

on meds for asthma

no other med conditions

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	**BPS**	: 70	**BPD**	:	**Pulse**	: 82	**Height**	: 155 cm	**Weight**	: 56.4 kg
BMI	: 23.47555 bpm	**Respiratory**	: 24 bpm	**SpO2**	: 96%	**Hip**	: cm	**Waist**	: cm		
Head Circumference	:	cm									
Urinalysis (Protein & Glucose)	:										
Notes	: risk of fall										

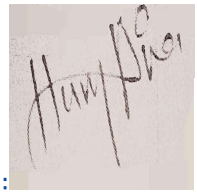
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
04-Jan-2025	Humaira	R50.9	Fever, unspecified	
04-Jan-2025	Humaira	H01.021	Squamous blepharitis right upper eyelid	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
BETAVAL-N / (BETAMETHASONE : 0.10% (NEOMYCIN : 0.5% CREAM TOPICAL / CREAM (15G, TUBE / Cream	Take 1 Unit(s), 1 Time(s) per Day For 7 Day(s)	7	1	
FUSIDERM / (FUSIDIC ACID : 2% OINTMENT TOPICAL / OINTMENT (15G, TUBE / Tablets	Take 1 Unit(s), 2 Time(s) per Day For 7 Day(s)	7	1	
CURAM / (AMOXICILLIN : 500 MG (CLAVULANIC ACID : 125 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, FOIL STRIP / Tablets	Take 1Tablets 2 Time(s) per Day For 4 Day(s) others	4	8	
GUPISONE 5MG / (PREDNISOLONE : 5 MG TABLETS ORAL / TABLETS (20S, BLISTER PACK / Ointment	Take 1Ointment 1 Time(s) per Day For 7 Day(s) others	7	7	
ARTIZ / (CETIRIZINE HCL : 10 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (10S, BLISTER PACK / Tablets	Take 1 Unit(s), 1 Time(s) per Day For 7 Day(s)	7	1	

Doctor Signature & Stamp :



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