



Patient details

Date	:	04-Jan-2025 / 8:30PM - 9:00PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	45440 / MD IBRAHIM TARAJUDDIN
Mobile #	:	971563093585
Gender / DOB/Age	:	Male / 02-May- 1987
Nationality	:	Bangladeshi
Insurance / Card#	:	FMC Standard Network / I019- 010-117633102- 01
EMID #	:	784-1987- 9864386-6



Medical Record details

Complaints

Complaints

PC : feeling pain and bleed after scaling done 2 months ago

bp elevated

no other m,ed condition

o/e swollen gums

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 : 86 BPD : Pulse : 86 Height : 162 cm Weight : 67 kg
BMI : 25.52964 bpm Respiratory : 18 bpm SpO2 : 99% Hip : cm Waist : cm

Head Circumference : cm

Urinalysis (Protein & Glucose) :

Notes : RISK OF FALL

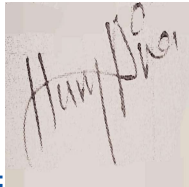
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
04-Jan-2025	Humaira	J06.9	Acute upper respiratory infection, unspecified	
04-Jan-2025	Humaira	K05.01	Acute gingivitis, non-plaque induced	
04-Jan-2025	Humaira	R50.9	Fever, unspecified	
04-Jan-2025	Humaira	R52	Pain, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
GUPISONE 5MG / (PREDNISOLONE : 5 MG TABLETS ORAL / TABLETS (40S, BLISTER / Tablets	Take 1Tablets 1 Time(s) per Day For 3 Day(s) others	3	3	
CURAM / (CLAVULANIC ACID : 125 MG (AMOXICILLIN : 875 MG TABLETS ORAL / TABLETS (14S, STRIP / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) after meal	7	7	
AL BAKER TRADING EST. / (AMYLMETACRESOL : 0.6MG) (ASCORBIC ACID (VITAMIN C) : 100 MG) (DICHLOPHENYL CARBINOL : 1.2 MG) TABLETS AMYLMETACRESOL/ASCORBIC ACID (VITAMIN C)/DICHLOPHENYL CARBINOL [0.6MG 100 MG 1.2 MG] / TABLETS (24S, BLISTER PACK) / Tablets	Take 1Tablets 1Time(s) perDay For 30 Day(s) after meal	30	30	
ARABIAN ETHICALS CO. / (CAFFEINE : 60 MG) (PARACETAMOL : 500 MG) TABLETS CAFFEINE/PARACETAMOL [60 MG 500 MG] / TABLETS (30S, BLISTER PACK) / Tablets	Take 1Tablets 4 Time(s) per Day For 7 Day(s) others	7	28	
MOVEN 15MG / (MELOXICAM : 15 MG CAPSULES ORAL / CAPSULES (30S, BLISTER / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7	7	

Doctor Signature & Stamp :



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

