



Patient details

Date	:	04-Jan-2025 / 9:15PM - 9:30PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	45441 / RAFAEL ALEXANDRE NUNES DE ALMEIDA
Mobile #	:	971543542442
Gender / DOB/Age	:	Male / 22-Feb- 1994
Nationality	:	Portuguese
Insurance / Card#	:	FMC Standard Network / I038- 010-121163103- 01
EMID #	:	784-1994- 3691860-3



Medical Record details

Complaints

Complaints

hx of trauma today ,, nail resction done in clinic today

no other complaints

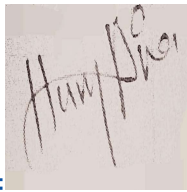
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
04-Jan-2025	Humaira	L02.619	Cutaneous abscess of unspecified foot	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ZYNEX 20 / (ESOMEPRAZOLE (AS MAGNESIUM : 20 MG CAPSULES (HARD GELATIN ORAL / CAPSULES (HARD GELATIN (14S, BLISTER / Tablets	Take 1Tablets 1 Time(s) per Day For 5 Day(s) morning empty stomach	5	5	
CELEBREX 100MG / (CELECOXIB : 100 MG CAPSULES ORAL / CAPSULES (20S, BLISTER PACK / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) after meal	5	10	
MOVEN 15MG / (MELOXICAM : 15 MG CAPSULES ORAL / CAPSULES (30S, BLISTER / Tablets	Take 1Tablets 1 Time(s) per Day For 5 Day(s) after meal	5	5	
KLACID XL 500MG / (CLARITHROMYCIN : 500 MG MODIFIED RELEASE TABLETS ORAL / MODIFIED RELEASE TABLETS (7S, BLISTER PACK / Tablets	Take 1Tablets 1 Time(s) per Day For 5 Day(s) after meal	5	5	

Doctor Signature & Stamp :



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

