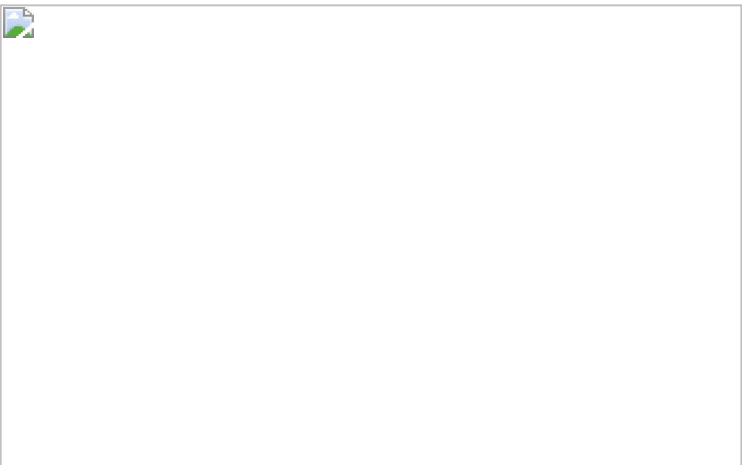




Patient details

Date	:	06-Jan-2025 / 12:45PM - 1:00PM		
Doctor	:	Humaira(General)		
Reg # / Patient Name	:	45453 / NAFINGAH BT NAHROFI NGAWIDI		
Mobile #	:	0554722863		
Gender / DOB/Age	:	Female / 15-Mar-1980		
Nationality	:	Indonesian		
Insurance / Card#	:	NAS VN / EKE1-J8E2-C2CJ-ECDE		
EMID #	:	784-1980-2068169-2		

Medical Record details

Complaints

Complaints

co back pain due to heavy weight lifting 3rd jan. 2025

oe chest is clear 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 : 37.1 BPS : 70 BPD : Pulse : 70 Height : 146 cm Weight : 48.7 kg

BMI : 22.84669 bpm Respiratory : 18 bpm SpO2 : 99% Hip : cm Waist : cm

Head Circumference : cm

Urinalysis (Protein & Glucose) :

Notes : RISK FOR FALL

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
06-Jan-2025	Humaira	M25.40	Effusion, unspecified joint	
06-Jan-2025	Humaira	R52	Pain, unspecified	
06-Jan-2025	Humaira	M62.830	Muscle spasm of back	

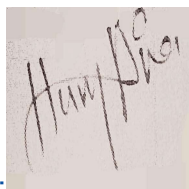
Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
13:08:07	01:12:00	96372	Therapeutic Prophylactic/Dx Injection Subq/Im	NA	NA	
00:00:00	00:00:00	9	Consultation Gp	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
VOLTAREN EMULGEL 12 HOURS / (DICLOFENAC DIETHYLAMINE : 23.2 MG / G) GEL DICLOFENAC DIETHYLAMINE [23.2 MG / G] / GEL (100G, TUBE) / Gel	Take 1Gel 1Time(s) perDay For 1 Day(s) others	1	1	
BRUFEN 600 / (IBUPROFEN : 600 MG) FILM COATED TABLETS IBUPROFEN [600 MG] / FILM COATED TABLETS (30S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) others	5	10	
MYDOCALM / (TOLPERISONE : 150 MG) SUGAR COATED TABLETS TOLPERISONE [150 MG] / SUGAR COATED TABLETS (30S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) others	5	10	

Doctor Signature & Stamp :



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

