



Patient details

Date	:	09-Jan-2025 / 8:15PM - 8:30PM
Doctor	:	Enomen Goodluck(General)
Reg # / Patient Name	:	38722 / JIREH CALEB PARAN MERCADO
Mobile #	:	0568971855
Gender / DOB/Age	:	Male / 19-Nov-2020
Nationality	:	Philippine
Insurance / Card#	:	NEURON - CN GN+ GNP / 52GM6132655264102
EMID #	:	784-2020-6586381-7



**Photo
Not
Available**

Medical Record details

Complaints

Complaints

fever, cough, runny nose

duration: 3 days

on exam: throat congested, hyperemic, enlarged tonsils.

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 : 38 BPS : 0 BPD : Pulse : 100 Height : 111 cm Weight : 17.7 kg

BMI : 14.36572 bpm Respiratory : 22 bpm SpO2 : 96% Hip : cm Waist : cm

Head Circumference : cm

Urinalysis (Protein & Glucose) :

Notes : RISK OF FALL

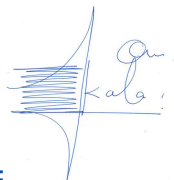
Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
09-Jan-2025	Enomen Goodluck	R05	Cough	
09-Jan-2025	Enomen Goodluck	R50.9	Fever, unspecified	
09-Jan-2025	Enomen Goodluck	J30.9	Allergic rhinitis, unspecified	
09-Jan-2025	Enomen Goodluck	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
IBULIFE / (IBUPROFEN : 100 MG/5ML) SUSPENSION IBUPROFEN [100 MG/5ML] / SUSPENSION (110ML, BOTTLE) / ML	Take 5ML 3 Time(s) per Day For 3 Day(s) after meal	3	1	
1/2 NORMAL SALINE / (SODIUM CHLORIDE : 0.45% W/V) SOLUTION FOR INJECTION SODIUM CHLORIDE [0.45% W/V] / SOLUTION FOR INJECTION (500ML, PLASTIC BOTTLE) / ML	Take 3ML 4 Time(s) per Day For 5 Day(s) before meal	5	60	
ADOL 250MG/5ML / (PARACETAMOL : 250 MG/5ML) SUSPENSION PARACETAMOL [250 MG/5ML] / SUSPENSION (100ML, GLASS BOTTLE) / ML	Take 5ML 4 Time(s) per Day For 5 Day(s) after meal	5	1	
ZYRTEC / (CETIRIZINE HCL : 1 MG/ML) SOLUTION (ORAL) CETIRIZINE HCL [1 MG/ML] / SOLUTION (ORAL) (75ML, BOTTLE) / ML	Take 5ML 1 Time(s) per Day For 7 Day(s) evening	7	35	

Doctor Signature & Stamp :



Dr. Enomen Goodluck Ekata
General Practitioner
DHA No: 28040827-001
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.

