



Patient details

Date	:	15-Jan-2025 / 10:45AM - 11:00AM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	44283 / REEM MHD BASSAM
Mobile #	:	0561759905
Gender / DOB/Age	:	Female / 05-Sep- 1983
Nationality	:	Syrian
Insurance / Card#	:	NAS - EN CN GN / 8IGJ-1FE2-C2CE- ICDE
EMID #	:	784-1983- 1035283-0



**Photo
Not
Available**

Medical Record details

Complaints

Complaints

co pain in urination lower abdominal pain dark colour of urine fever on and off 13th jan. 2025

oe chest is clear no added sounds

restless

Vital Signs

Temperature : 36.7 BPS : 69 BPD : Pulse : 56 Height : 161 cm Weight : 60 kg
 BMI : 23.14725 bpm Respiratory : 18 bpm SpO2 : 96% Hip : cm Waist : cm
 Head Circumference : cm
 Urinalysis (Protein & Glucose) :
 Notes : risk of fall

Diagnosis

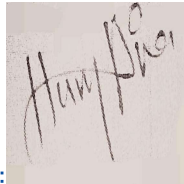
Date	Doctor	ICD Code	Diagnosis	Notes
15-Jan-2025	Humaira	R50.9	Fever, unspecified	
15-Jan-2025	Humaira	R30.9	Painful micturition, unspecified	
15-Jan-2025	Humaira	N39.0	Urinary tract infection, site not specified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ALKA-CRAN / (TARTARIC ACID : 0.89G) (SODIUM BICARBONATE : 1.76G) (CRANBERRY EXTRACT : 0.25 G) (TRI SODIUM CITRATE ANHYDROUS : 0.63G) (CITRIC ACID ANHYDROUS : 0.72G) EFFERVESCENT GRANULES TARTARIC ACID/SODIUM BICARBONATE/CRANBERRY EXTRACT/TRI SODIUM CITRATE ANHYDROUS/CITRIC ACID ANHYDROUS [0.89G 1.76G 0.25 G 0.63G 0.72G] / EFFERVESCENT GRANULES (30 X 4.25G, SACHET) / sachet	Take 1sachet 3 Time(s) per Day For 7 Day(s) others	7	21	

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
MIRAZOL / (METRONIDAZOLE : 500 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	
CIFRAN 500 / (CIPROFLOXACIN (AS HYDROCHLORIDE) : 500 MG) FILM COATED TABLETS CIPROFLOXACIN (AS HYDROCHLORIDE) [500 MG] / FILM COATED TABLETS (10S, BLISTER) / Tablets	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7	7	
ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS CAFFEINE/PARACETAMOL [65 MG 500 MG] / CAPLETS (24S, BOX) / Tablets	Take 1Tablets 2 Time(s) per Day For 6 Day(s) others	6	12	

Doctor Signature & Stamp :



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

