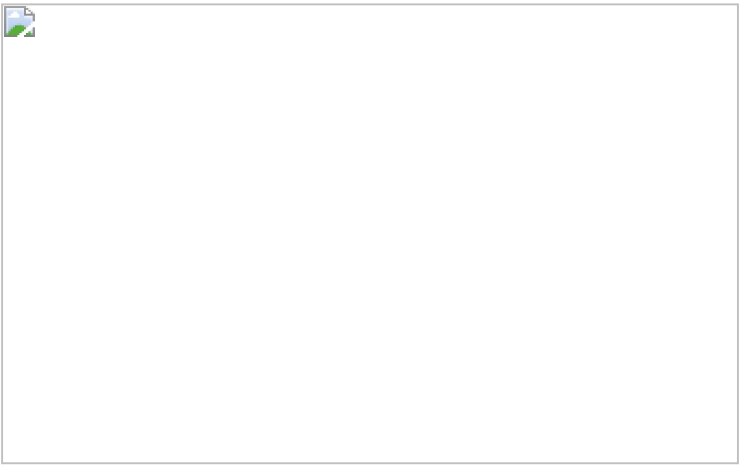




## Patient details

|                      |   |                                              |                                                                                    |                                                                                     |
|----------------------|---|----------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Date                 | : | 17-Jan-2025 / 12:00AM - 12:15AM              |  |  |
| Doctor               | : | Enomen Goodluck(General)                     |                                                                                    |                                                                                     |
| Reg # / Patient Name | : | 45561 / Aswani Anil Anil Kumar               |                                                                                    |                                                                                     |
| Mobile #             | : | 505606873                                    |                                                                                    |                                                                                     |
| Gender / DOB/Age     | : | Female / 25-Sep-2001                         |                                                                                    |                                                                                     |
| Nationality          | : | Indian                                       |                                                                                    |                                                                                     |
| Insurance / Card#    | : | FMC Standard Network / I005-010-121540537-01 |                                                                                    |                                                                                     |
| EMID #               | : | 784-2001-9794720-1                           |                                                                                    |                                                                                     |

## Medical Record details

**Complaints****Complaints**

painful micturation since 3 days,and feeling not empty bladder

**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 : 36.6 BPS : 80 BPD : Pulse : 78 Height : 157 cm Weight : 75 kg  
 BMI : 30.4272 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 |
|-------------|-----------------|----------|---------------------------------------------|-------|
| 17-Jan-2025 | Enomen Goodluck | R52      | Pain, unspecified                           |       |
| 17-Jan-2025 | Enomen Goodluck | N39.0    | Urinary tract infection, site not specified |       |

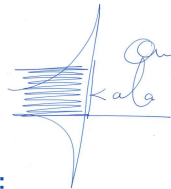
**Treatments**

| Start Time | End Time | CPT Code         | Treatment                 | Teeth No | Surface | Notes |
|------------|----------|------------------|---------------------------|----------|---------|-------|
| 00:00:00   | 00:00:00 | 0005-149902-1021 | CLOFEN                    | NA       | NA      |       |
| 00:00:00   | 00:00:00 | 96372            | THER/PROPH/DIAG INJ SC/IM | NA       | NA      |       |
| 00:00:00   | 00:00:00 | 9                | Consultation Gp           | NA       | NA      |       |

**Prescription**

| Generic/Dose/Form                                                                                                                                                                                                                                                                                                                                                                                                          | Instructions                                        | Duration | Quantity | Refill |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|----------|--------|
| OMACIP / (CIPROFLOXACIN : 250 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets                                                                                                                                                                                                                                                                                                              | Take 1Tablets 2 Time(s) per Day For 5 Day(s) others | 5        | 10       |        |
| VOLTIC / (DICLOFENAC SODIUM : 50 MG) TABLETS DICLOFENAC SODIUM [50 MG] / TABLETS (20S, BLISTER PACK) / Tablets                                                                                                                                                                                                                                                                                                             | Take 1Tablets 2 Time(s) per Day For 7 Day(s) others | 7        | 14       |        |
| SERODASE / (SERRAPEPTASE : 10 MG) TABLETS SERRAPEPTASE [10 MG] / TABLETS (30S, BLISTER) / Tablets                                                                                                                                                                                                                                                                                                                          | Take 1Tablets 2 Time(s) per Day For 7 Day(s) others | 7        | 14       |        |
| ALKACURE CRAN / (SODIUM BICARBONATE BP : 1.77G) (SODIUM CITRATE (ANHYDROUS) USP : 0.61G) (CITRIC ACID (ANHYDROUS) BP : 0.59 G) (TARTARIC ACID BP : 0.89G) (CRANBERRY EXTRACT HIS : 0.1 G) EFFERVESCENT GRANULES SODIUM BICARBONATE BP/SODIUM CITRATE (ANHYDROUS) USP/CITRIC ACID (ANHYDROUS) BP/TARTARIC ACID BP/CRANBERRY EXTRACT HIS [1.77G 0.61G 0.59 G 0.89G 0.1 G] / EFFERVESCENT GRANULES (4G X 10, SACHET) / sachet | Take 1sachet 2 Time(s) per Day For 7 Day(s) others  | 7        | 14       |        |

Doctor Signature &amp; Stamp :



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

