



Patient details

Date	:	18-Jan-2025 / 5:30PM - 5:45PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	41822 / NAWAZ KHAN MUHAMMAD HANIF
Mobile #	:	971564922012
Gender / DOB/Age	:	Male / 01-Jan-1979
Nationality	:	Pakistani
Insurance / Card#	:	NAS VN / IG92-I24C-DCDE-IDEA
EMID #	:	784-1979-8404297-4



Medical Record details

Complaints

Complaints

co fever on and off dry cough pain in throat nasal congestion 15th jan. 2025

oe

chest is congested no added sounds

restless

Vital Signs

Temperature	: 37.4	BPS	: 81	BPD	:	Pulse	: 101	Height	: 172 cm	Weight	: 90 kg
BMI	: 30.42185 bpm	Respiratory	: 18 bpm	SpO2	: 97%	Hip	: cm	Waist	: cm		
Head Circumference	:		cm								
Urinalysis (Protein & Glucose)	:										
Notes	: risk of fall										

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
18-Jan-2025	Humaira	K29.00	Acute gastritis without bleeding	
18-Jan-2025	Humaira	R50.9	Fever, unspecified	
18-Jan-2025	Humaira	R05	Cough	
18-Jan-2025	Humaira	J00	Acute nasopharyngitis [common cold]	
18-Jan-2025	Humaira	J06.9	Acute upper respiratory infection, unspecified	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
ZEAL SF / (TRIKATU : 2.5 MG/5 ML) (ADHATODA VASICA : 20 MG/5ML) (GLYCYRRHIZA GLABRA : 20 MG/5ML) (ZINGIBER OFFICINALE : 5 MG/5ML)	Take 10ML 3 Time(s) per Day	1	1	

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
(OCIMUM SANCTUM : 20 MG/5ML) (SOLANUM XANTHOCARPUM : 6.25MG/5ML) (MENTHA SYLVESTRIS : 3 MG/5ML) SYRUP TRIKATU/ADHATODA VASICA/GLYCYRRHIZA GLABRA/ZINGIBER OFFICINALE/OCIMUM SANCTUM/SOLANUM XANTHOCARPUM/MENTHA SYLVESTRIS [2.5 MG/5 ML 20 MG/5ML 20 MG/5ML 5 MG/5ML 20 MG/5ML 6.25MG/5ML 3 MG/5ML] / SYRUP (100ML, PLASTIC BOTTLE) / Syrup	For 7 Day(s) others			
GERDIL 40 / (ESOMEPRAZOLE (AS MAGNESIUM) : 40 MG) DELAYED RELEASE CAPSULES ESOMEPRAZOLE (AS MAGNESIUM) [40 MG] / DELAYED RELEASE CAPSULES (30S, CONTAINER) / Capsule	Take 1Capsule 1 Time(s) per Day For 7 Day(s) others	7	7	
ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK) / Tablets	Take 1Tablet at night	5	5	
AUGMENTIN 1G / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG 875 MG] / TABLETS (14S, BLISTER PACK) / 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 :


