



Patient details

Date	:	21-Jan-2025 / 6:45PM - 7:00PM		
Doctor	:	Humaira(General)		
Reg # / Patient Name	:	37425 / ROMANO ISAAC WANDERA		
Mobile #	:	0563504358		
Gender / DOB/Age	:	Male / 01-Jan-1992		
Nationality	:	Ugandan		
Insurance / Card#	:	FMC Standard Network / I019-010-117284782-01		
EMID #	:	784-1992-7072686-4		

Medical Record details

Complaints

Complaints

co headache body pain eyes pain feeling lethargy back pain 19th jan. 2025

oe chest is clear no added sounds

restless

Vital Signs

Temperature : 36.3 BPS : 76 BPD : Pulse : 65 Height : 173 cm Weight : 64 kg
 BMI : 21.38394 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
21-Jan-2025	Humaira	R51.9	Headache, unspecified	
21-Jan-2025	Humaira	R52	Pain, unspecified	
21-Jan-2025	Humaira	M62.830	Muscle spasm of back	

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	
VOLFAST / (DICLOFENAC POTASSIUM : 50 MG) POWDER FOR SOLUTION DICLOFENAC POTASSIUM [50 MG] / POWDER FOR SOLUTION	Take 1sachet 3 Time(s) per Day For 3 Day(s) others	3	9	

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
(9S, SACHET) / sachet				
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 :

