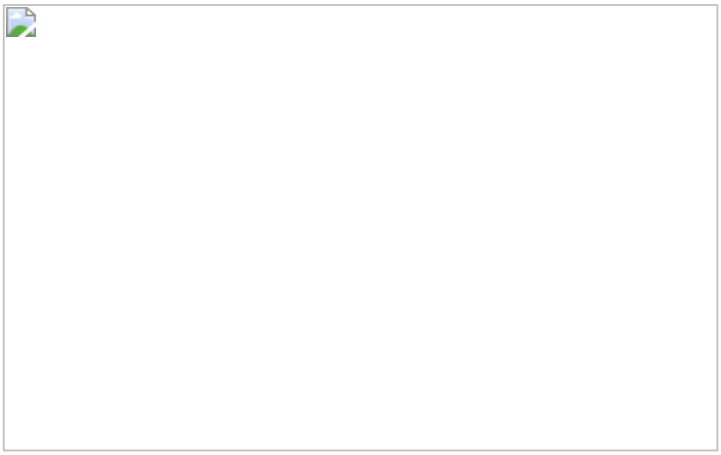
Patient details

Date	:	22-Jan-2025 / 8:45PM - 9:00PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	45615 / SHAMEKA SALSABIL CHOUDHURY
Mobile #	:	0585884867
Gender / DOB/Age	:	Female / 08-Feb-1994
Nationality	:	British
Insurance / Card#	:	NEXTCARE -OP PCP / 9545-3089-6DF4-9E25
EMID #	:	784-1996-3747847-2



Medical Record details

Complaints

Complaints

co fever on and off productive cough nasal congestion 13 jan. 2025

oe chest is congested no added sounds

restless

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	: 36.8	**BPS**	: 72	**BPD**	:	**Pulse**	: 78	**Height**	: 162 cm	**Weight**	: 64 kg
BMI	: 24.38653 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
22-Jan-2025	Humaira	K29.00	Acute gastritis without bleeding	
22-Jan-2025	Humaira	R50.9	Fever, unspecified	
22-Jan-2025	Humaira	R05	Cough	
22-Jan-2025	Humaira	J30.9	Allergic rhinitis, unspecified	
22-Jan-2025	Humaira	J06.9	Acute upper respiratory infection, unspecified	

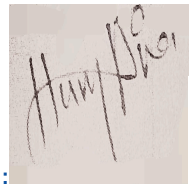
Treatments

Start Time	End Time	CPT Code	Treatment	Teeth No	Surface	Notes
00:00:00	00:00:00	86140	C-reactive protein;	NA	NA	
21:31:21	10:06:21	96365	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour	NA	NA	
21:31:21	09:36:21	96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	NA	NA	
00:00:00	00:00:00	0188-135906-2441	PULMICORT-(BUDESONIDE : 0.5 MG/ML) SUSPENSION FOR NEBULIZATION	NA	NA	
00:00:00	00:00:00	94640	Pressurized or nonpressurized inhalation treatment for acute airway obstruction or for sputum induction for diagnostic purposes (eg, with an aerosol generator, nebulizer, metered dose inhaler or intermittent positive pressure breathing [IPPB] device)	NA	NA	
00:00:00	00:00:00	9	GP Consultation	NA	NA	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
AMYDRAMINE - II / (DIPHENHYDRAMINE : 12.5 MG/5ML SYRUP (SUGAR FREE ORAL / SYRUP (SUGAR FREE (120ML, BOTTLE / Syrup	Take 10ML 3 Time(s) per Day For 7 Day(s) after meal	1	1	
PUMPINOX 40MG / (ESOMEPRAZOLE (AS MAGNESIUM) : 40 MG) ENTERIC COATED TABLETS ESOMEPRAZOLE (AS MAGNESIUM) [40 MG] / ENTERIC COATED 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 ORAL / CAPLETS (24S, BOX / Tablets	Take 1Tablets 2 Time(s) per Day For 6 Day(s) others	6	12	
MACROMAX 500 / (AZITHROMYCIN : 500 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (3S, BLISTER / Tablets	Take 1Tablets 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	10	10	

Doctor Signature & Stamp :



Dr. Humaira Mumtaz
General Practitioner
DHA No: 54155530-002
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