



Patient details

Date	:	31-Jan-2025 / 8:00PM - 8:15PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	39296 / DJAMEL SEHAD
Mobile #	:	0524408876
Gender / DOB/Age	:	Male / 17-Nov-1994
Nationality	:	Algerian
Insurance / Card#	:	E CARE - Blue Network / I040-029-117807588-01
EMID #	:	784-1994-8553415-2



**Photo
Not
Available**

Medical Record details

Complaints**Complaints**

co back pain due to heavy weight lifting 24th jan. 2025

oe chest is clear no added sounds

restless

Vital Signs

Temperature : 36 BPS : 75 BPD : Pulse : 86 Height : 184 cm Weight : 81 kg

BMI : 23.92486 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
31-Jan-2025	Humaira	R52	Pain, unspecified	
31-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	
BRUFEN 400MG / (IBUPROFEN : 400 MG) FILM COATED TABLETS IBUPROFEN [400 MG] / FILM COATED TABLETS (30S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 5 Day(s) others	5	10	
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 :


