



Patient details

Date	:	15-Feb-2025 / 2:45PM - 3:00PM
Doctor	:	Humaira(General)
Reg # / Patient Name	:	45738 / IBRAHIM HAMDY MOHAMED BASSYOUNI
Mobile #	:	0529655990
Gender / DOB/Age	:	Male / 01-Jan-1990
Nationality	:	Egyptian
Insurance / Card#	:	FMC Standard Network / I019-010-121824955-01
EMID #	:	784-1990-5297595-2



Photo
Not
Available

Medical Record details

Complaints

Complaints

high grade fever tonsilitis sever body palin
runny nose
oc tonsil hyperplasia

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 : 37 BPS : 80 BPD : Pulse : 82 Height : 173 cm Weight : 87 kg
BMI : 29.0688 bpm Respiratory : 18 bpm SpO2 : 99% Hip : cm Waist : cm
Head Circumference : cm
Urinalysis (Protein & Glucose) :
Notes : RISK OF FALL

Diagnosis

Date	Doctor	ICD Code	Diagnosis	Notes
15-Feb-2025	Humaira	R52	Pain, unspecified	
15-Feb-2025	Humaira	R05	Cough	
15-Feb-2025	Humaira	R50.9	Fever, unspecified	
15-Feb-2025	Humaira	J03.01	Acute recurrent streptococcal tonsillitis	

Prescription

Generic/Dose/Form	Instructions	Duration	Quantity	Refill
DICLOFAST / (DICLOFENAC POTASSIUM : 50 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 3 Day(s) others	3	6	
AMYDRAMINE - II / (DIPHENHYDRAMINE : 12.5 MG/5ML) SYRUP (SUGAR FREE) DIPHENHYDRAMINE [12.5 MG/5ML] / SYRUP (SUGAR FREE) (120ML, BOTTLE) / Syrup	Take 1Syrup 2 Time(s) per Day For 5 Day(s) others	5	10	
PANADOL COLD & FLU / (CHLORPHENIRAMINE MALEATE : 2 MG) (PARACETAMOL : 500 MG) (PSEUDOEPHEDRINE : 30 MG) TABLETS CHLORPHENIRAMINE MALEATE/PARACETAMOL/PSEUDOEPHEDRINE [2 MG 500 MG 30 MG] / TABLETS (24S, BLISTER PACK) / Tablets	Take 1Tablets 3 Time(s) per Day For 7 Day(s) others	7	21	
ZYVEX ADVANCED ORAL SPRAY / (HYDROXYPROPYLMETHYLCELLULOSE : 150 MG/ 30ML) SPRAY SOLUTION HYDROXYPROPYLMETHYLCELLULOSE [150 MG/ 30ML] / SPRAY SOLUTION (30ML, SPRAY BOTTLE) / Spray	Take 1Spray 2Time(s) perDay For 5 Day(s) others	5	1	
PANTOZOL / (PANTOPRAZOLE (AS SODIUM) : 40 MG) GASTRO-RESISTANT TABLETS PANTOPRAZOLE (AS SODIUM) [40 MG] / GASTRO-RESISTANT TABLETS (30S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others before meal	7	14	
AUGMENTIN 625MG / (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 500 MG) TABLETS CLAVULANIC ACID/AMOXICILLIN [125 MG 500 MG] / TABLETS (20S, BLISTER PACK) / Tablets	Take 1Tablets 2 Time(s) per Day For 7 Day(s) others	7	14	

Doctor Signature & Stamp :

