



1.HealthNet Policy Number

2.Patient Name

3.Patient Date of Birth & Sex

5.Nature of illness or Injury

6.Are You the patient's primary physician

7.Presenting Complaints:

8.Duration of Symptoms:

9.Onset of Condition:

10.Relevant Past Medical/Surgical History

12.Etiology:

13.In case of Injury:mode of Injury/place of Injury

14.Plan / Details of Management

15.In Case of Hospitalization: Date of Admission:

16.

1038-000-115438086-01

ARSHAD PATINHARE MANNATHIVALAPPIL ABOOBACKER

28-01-87(dd/mm/yy)

Mobile No.0526918930

☐ Acute

☐ Chronic

☐ Emergency

☐ Yes

☐ No

C/o: Posterior neck pain for the past 2 days, also pain on swallowing.

No fever, no nasal congestion, no cough, no body pain, no weakness, no malaise.

Has difficulty turning head sideways,

but there is no photophobia and no phonophobia.

PMHx: Gout (on uric acid tablets - name unknown, but likely Febuxostat as seen from previous prescription)

Exam: Stiff neck, negative kernings sign however.

Diagnosis:Spasmodic torticollis, Acute pharyngitis, unspecified, Pain, unspecified

a.ProcedureBlood Count Complete,C reactive Protein,CLOFEN ,Intramuscular injection,Gp Consultation

b.Laboratory Test:

c.Radiology / Investigations:

Date of Discharge:

PRESCRIPTION WITH DOSAGE & DURATION

Code	Generic	Dosage	Duration	Instructions
0252-185801-0391	(DIPHENHYDRAMINE : 25 MG) (PARACETAMOL : 500 MG) (PSEUDOEPHEDRINE : 30 MG) FILM COATED TABLETS	FILM COATED TABLETS (20'S, BLISTER PACK)	10	Take 1Tablets 2 Time(s) per Day For 10 Day(s) after meal
0027-149904-0341	(DICLOFENAC SODIUM : 50 MG) ENTERIC COATED TABLETS	ENTERIC COATED TABLETS (20'S, BLISTER PACK)	5	Take 1Tablets 2Time(s) perDay For 5 Day(s) after meal
1217-373201-2401	(TOLPERISONE : 150 MG) SUGAR COATED TABLETS	SUGAR COATED TABLETS (30'S, BLISTER PACK)	5	Take 2Tablets 2 Time(s) per Day For 5 Day(s) others

Date:16-05-23(dd/mm/yy)

Doctor's NameEnomen Goodluck

Physician CodeDHA-P-28040827 HNM Code

Authorization

2. Authorization Code:

☒ Male☐ Female

☐ Acute

☐ Chronic

☐ Emergency

☐ Yes

☐ No

ICD Code G24.3, J02.9, R52

CPT code85025,86140,0005-149902-1021,96372,9

Signature and Stamp

Dr. Enomen Goodluck Ekata

General Practitioner

DHA No: 28040827-001

PESHAWAR MEDICAL CENTER LLC

BURAI : U.A.E.

I hereby authorize the Physician, Hospital or Pharmacy to file a claim for medical services on my behalf and I confirm that the above mentioned examination / investigation / therapy is given to me by the doctor. I hereby authorize any Hospital, Physician, Pharmacy or any other person who has provided medical services to me or my dependents to furnish NGI with any and all information with regard to any medical history, medical condition or medical services and copies of all medical and hospital records.

A Photocopy or teletax copy of this authorization shall be considered effective any valid as the original

Date: 16-05-23(dd/mm/yy)

Signature of Insured / Claimint



Copy of NGI - Pharmacy

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