



PRESCRIPTION

Patient Name	:	JURAI AHMED	Age	:	26 Years
Address	:		Mobile #	:	+919164843803
Emirates Id	:	784-1998-8404274-0	Weight	:	66 Kg
Medical Record #	:	45274			
Insurance Company Name	:	NEXTCARE -OP PCP	Insurance Plan	:	ORIENT INSURANCE P.J.S.C
Insurance Card No.	:	86C8-66EC-A4D6-08D5			
Principal Diagnosis	:	J06.9 - Acute upper respiratory infection, unspecified			
Secondary Diagnosis	:	J30.9 - Allergic rhinitis, unspecified, R50.9 - Fever, unspecified, R05 - Cough, K29.00 - Acute gastritis without bleeding			

S.No.	Generic/Dose/Form	Instructions	Quantity	Route of Admin	ERX No
1	GERDIL 20 / (ESOMEPRAZOLE (AS MAGNESIUM) : 20 MG) DELAYED RELEASE CAPSULES ESOMEPRAZOLE (AS MAGNESIUM) [20 MG] / DELAYED RELEASE CAPSULES (30S, CONTAINER)	Take 1Capsule 2 Time(s) per Day For 7 Day(s) others	14	ROA074 - ORAL	128134897
2	AMYDRAMINE - II / (DIPHENHYDRAMINE : 12.5 MG/5ML SYRUP (SUGAR FREE ORAL / SYRUP (SUGAR FREE (120ML, BOTTLE	Take 10 ml 3 times in a day	1	ROA074 - ORAL	128134897
3	MACROMAX 500 / (AZITHROMYCIN : 500 MG FILM COATED TABLETS ORAL / FILM COATED TABLETS (3S, BLISTER	Take 1Tablets 1 Time(s) per Day For 7 Day(s) others	7	ROA074 - ORAL	128134897
4	ARTIZ / (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS CETIRIZINE HCL [10 MG] / FILM COATED TABLETS (10S, BLISTER PACK)	Take 1Tablet at night	5	ROA074 - ORAL	128134897
5	ADOL EXTRA / (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS CAFFEINE/PARACETAMOL [65 MG 500 MG] / CAPLETS (24S, BOX)	Take 1Tablets 2 Time(s) per Day For 6 Day(s) others	12	ROA074 - ORAL	128134897

Humaira

DHA-P-54155530

19-Dec-2024

Dr. Humaira Mumtaz
General Practitioner
DHA No: 54155530-002
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.

Doctor Name

License Number

Date

Signature & Stamp

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