

Date: 18/10/2020				Pay Method: R		MRN: 639843		Age/Sex : 39/M		Doctor: DR. MOHAMMED AFZAL	
Vital Signs: Temperature: 37				BP: 110/80		Pulse: 88		CHECK-UP : Trn. 11:08AM Check-In: 11:10AM Check-Out:			
Chief Complaint: HYPERLIPIDAEMIC				C/O CHEST PAIN ON EXERTION							
				USING MEDICATION,							
Significant Signs: S1 S2 NO ADED				CHEST CLEAR,							
Duration of Illness: CH,				LMP:							
Other Conditions:											
Diagnosis: HYPERLIPIDAEMIA				ANGINA,							
Management: MEDICATION GIVWEN				ADVISED S CHOLESTROL AND TG AS CASE OF MIXED HYPERLIPIDAEMIA							
				ECG AS C/O CHEST PAIN,							
ICD Princ. Code: I10				Essential (primary) hypertension							
ICD 2nd Code: E78.2				Mixed hyperlipidaemia							
ICD 3rd Code: I20				Angina pectoris							
ICD 4th Code:				<input type="checkbox"/> Chronic		<input type="checkbox"/> Congenital		<input type="checkbox"/> RTA			
				<input type="checkbox"/> Work Related		<input type="checkbox"/> Vaccination		<input type="checkbox"/> Check-Up			
				<input type="checkbox"/> Psychiatric		<input type="checkbox"/> Infertility		<input type="checkbox"/> Pregnancy			
				<input type="checkbox"/> Cleaning		<input type="checkbox"/> Sports Related		<input type="checkbox"/> Orthodontics			
Trn. Type	Date	Code	Service Description + Dosage						Quantity		
CARDIOLOGY											
Requisition	18/10/2020	0684	E.C.G						1		
Transaction	18/10/2020	0684	E.C.G						1		
LABORATORY											
Requisition	18/10/2020	0034	CHOLESTEROL						1		
Requisition	18/10/2020	0035	TG						1		
Transaction	18/10/2020	0034	CHOLESTEROL						1		
Transaction	18/10/2020	0035	TG						1		
PHARMACY											
Requisition	18/10/2020	GEN02232	FENOFIBRATE 145MG TAB ONE OD Oral Every 24 hours For 30 Days						1		
Requisition	18/10/2020	GEN01732	BISOPROLOL FUMARATE 2.5MG TAB ONE OD Oral Every 24 hours For 30 Days						1		
Requisition	18/10/2020	GEN03106	ROSUVASTATIN 20MG TAB ONE OD Oral Every 24 hours For 30 Days						1		
Requisition	18/10/2020	GEN01967	CLOPIDOGREL 75MG TAB ONE OD Oral Every 24 hours For 30 Days						1		
Requisition	18/10/2020	GEN02233	FENOFIBRATE 200MG CAP ONE OD PL CANCEL FENOFIBRATE 145 AND ISSUE FENFIBRATE 145 Oral Every 24 hours For 30 Days						1		
Transaction	18/10/2020	00002767	SELECTA 2.5MG 30TAB						1		
Transaction	18/10/2020	00007290	IVARIN 20MG 30TAB						1		
Transaction	18/10/2020	00010665	CLOGREL 75MG 30TAB						1		
Transaction	18/10/2020	00008716	FENOGAL 200MG 30CAP						1		
Transaction	18/10/2020	00002767	SELECTA 2.5MG 30TAB						1		
Transaction	18/10/2020	00007290	IVARIN 20MG 30TAB						1		
Transaction	18/10/2020	00010665	CLOGREL 75MG 30TAB						1		
Transaction	18/10/2020	00008716	FENOGAL 200MG 30CAP						1		