

Date: 06/10/2020	Pay Method: R	MRN: 186066	Age/Sex : 51/M	Doctor: DR. MOHAMMED AFZAL
Vital Signs: Temperature: 37 BP: 130/90 Pulse: 88 CHECK-UP : Trn. 08:06AM Check-In: 10:09AM Check-Out:				
Chief Complaint: hypertensive diabeic c/o polyurea c/o chest pain on exertion he got 3 times severe chest pain in last month,				
Significant Signs: pulse 78 bp 130/80 s1 s2 no aded sound chest clear,				
Duration of Illness: ch, LMP:				
Other Conditions:				
Diagnosis: hypertension d mellitis angina HYPERLIPIDAEMIA,				
Management: adv ecg as chest pain rbs and cholestrol as diabetic and hyperlipidaemic as diabetic and hypertensive and c/o polyurea and early fatigue RBS 418 RBS 293 LDL 133,				
ICD Princ. Code: I10 Essential (primary) hypertension				
ICD 2nd Code: E11.42 Type 2 diabetes mellitus with diabetic polyneuropathy <input type="checkbox"/> Chronic <input type="checkbox"/> Congenital <input type="checkbox"/> RTA				
ICD 3rd Code: E78.4 Other hyperlipidaemia <input type="checkbox"/> Work Related <input type="checkbox"/> Vaccination <input type="checkbox"/> Check-Up				
ICD 4th Code: <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	
EMERGENCY Quantity				
Requisition	06/10/2020	5057	Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report	1
Transaction	06/10/2020	5057	Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report	1
LABORATORY Quantity				
Requisition	06/10/2020	5021	Lipid panel This panel must include the following: Cholesterol, serum, total (82465) Lipoprotein, di	1
Requisition	06/10/2020	5031	Glucose; quantitative, blood (except reagent strip)	1
Transaction	06/10/2020	5021	Lipid panel This panel must include the following: Cholesterol, serum, total (82465) Lipoprotein, di	1
Transaction	06/10/2020	5031	Glucose; quantitative, blood (except reagent strip)	1
PHARMACY Quantity				
Requisition	06/10/2020	GEN01510	ACETYL SALICYLIC ACID 100MG TAB ONE OD Oral Every 24 hours For 30 Days	1
Requisition	06/10/2020	GEN01967	CLOPIDOGREL 75MG TAB ONE OD Oral Every 24 hours For 30 Days	1
Requisition	06/10/2020	GEN01732	BISOPROLOL FUMARATE 2.5MG TAB ONE OD Oral Every 24 hours For 30 Days	1
Requisition	06/10/2020	GEN03106	ROSUVASTATIN 20MG TAB ONE OD Oral Every 24 hours For 30 Days	1
Requisition	06/10/2020	GEN03077	RABEPRAZOLE 20MG TAB ONE OD Oral Every 24 hours For 30 Days	1
Requisition	06/10/2020	GEN02658	LOSARTAN 50MG TAB ONE OD Oral Every 24 hours For 30 Days	1
Requisition	06/10/2020	GEN02992	PIOGLITAZONE 30MG TAB ONE OD Oral Every 24 hours For 30 Days	1
Requisition	06/10/2020	GEN03192	SOLUBLE INSULIN ASPART R- DNA) 30% + INSULIN ASPART CRYSTALLIZED WITH PROTAMINE 70% INJ 50 IU BID Cutaneous Every twelve hours For 30 Days	1
Requisition	06/10/2020	GEN02719	METFORMIN HCL 500MG TAB ONE BID Oral Every twelve hours For 30 Days	1
Requisition	06/10/2020	00009523	B.D.Microfine Needles 32Gx4MM 100/Box BID Cutaneous Every twelve hours For 30 Days	1
Transaction	06/10/2020	00010306	AZERA 100MG 90TAB	1
Transaction	06/10/2020	00002767	SELECTA 2.5MG 30TAB	1
Transaction	06/10/2020	00007290	IVARIN 20MG 30TAB	1
Transaction	06/10/2020	00005265	RABEZOLE 20MG 14TAB	2
Transaction	06/10/2020	00003992	SORTIVA 50MG 30TAB	1
Transaction	06/10/2020	00005028	NOVOMIX 30FLEXPEN 5x3ML Pen	2
Transaction	06/10/2020	00002030	NOVOFINE NEEDLES 31# 0.25x6mm	1