

Date: 06/10/2020		Pay Method: R		MRN: 654974		Age/Sex : 35/M		Doctor: DR. MOHAMMED AFZAL	
Vital Signs:		Temperature:		BP:		Pulse:		FOLLOW-UP :Trn. 06:53PM Check-In: 8:56PM Check-Out:	
Chief Complaint:		C/O NAUSEA VMITING PAIN EPIGASTRIUM WITH GASES IN ABDOMEN ONE DAY ALSO C/O LOOSE MOTION WITH SMALL STOOLS AND GASES SINCE MORNING,							
Significant Signs:		S1 S2 NOP ADED SOUND CHEST CLEAR,							
Duration of Illness:		CH/AC,		LMP:					
Other Conditions:									
Diagnosis:		HYPERTENSION ANGINA GASTRITIS GERD,							
Management:		MEDICATION GIVEN ADVISED TO CONSULT INTERNIST ALSO,							
ICD Princ. Code:		I10 Essential (primary) hypertension							
ICD 2nd Code:		I20 Angina pectoris							
ICD 3rd Code:		K29.6 Other gastritis							
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
PHARMACY									
Requisition	04/10/2020	GEN01653	ATORVASTATIN 20MG TAB ONE OD Oral Every 24 hours For 30 Days						1
Requisition	04/10/2020	GEN01732	BISOPROLOL FUMARATE 2.5MG TAB ONE OD Oral Every 24 hours For 30 Days						1
Requisition	04/10/2020	GEN03323	TRIMETAZIDINE DIHYDRO CHLORIDE 35MG TAB ONE BID Oral Every twelve hours For 30 Days						1
Requisition	04/10/2020	GEN02660	LOSARTAN POTASSIUM 50MG TAB ONE OD Oral Every 24 hours For 30 Days						1
Requisition	04/10/2020	GEN02901	PANTOPRAZOLE 40MG TAB ONE OD Oral Every 24 hours For 15 Days						1
Requisition	04/10/2020	GEN01967	CLOPIDOGREL 75MG TAB ONE OD Oral Every 24 hours For 28 Days						1
Requisition	06/10/2020	GEN01562	ALUMINIUM HYDROXIDE + MAGNESIUM HYDROXIDE + SIMETHICONE SYP 10 ML TID Oral Every eight hours For 28 Days						1
Requisition	06/10/2020	GEN02136	DOMPERIDONE 10MG TAB ONE BID Oral Every 24 hours For 28 Days						1
Transaction	04/10/2020	00002767	SELECTA 2.5MG 30TAB						1
Transaction	04/10/2020	00004570	VASTAREL-MR 35MG 60TAB						1
Transaction	04/10/2020	00008146	PALETA 75MG 28TAB						1
Transaction	04/10/2020	00003992	SORTIVA 50MG 30TAB						1
Transaction	04/10/2020	00002399	PROTON 40MG 14TAB						1
Transaction	05/10/2020	00005054	ASTATIN 20MG 30TAB						1
Transaction	06/10/2020	00000925	EPICOGEL SYRUP						2
Transaction	06/10/2020	00004107	DOMPY 10MG 30TAB						1