

Date: 06/10/2020 Pay Method: R MRN: 777640 Age/Sex : 68/M Doctor: DR. MOHAMMED AFZAL			
Vital Signs: Temperature: 37 BP: 160/100 Pulse: 88 CHECK-UP : Trn. 06:59PM Check-In: 7:16PM Check-Out:			
Chief Complaint: HYPERTENSIVE DIABETIC C/O PALPITATION BREATHLESSNESS SINCE LONG GETS NON SPECIFIC PAINS ON DIFFERENT POINTS			
Significant Signs: INSULIN TABUVAN 80 ADALAT 30 JENUVIA METFOR ASPIRIN RELAXAN PANTAZOLE, S1 S2 NO ADED SOUND CHEST CLEAR BO 160/100,			
Duration of Illness: CH,		LMP:	
Other Conditions:			
Diagnosis: HYPERTENSION ANGINA D MELLITIS,			
Management: ADV ECG AND ECHO AS C/O PALPITATION AND BREATHLESSNESS RBS CREATININ S CHOLESTROL AS DIABETIC C/O POLYUREA HAS HX OF HYPERTENSION AND HYPERLIPIDAEMIA CONT ALL OTHER BUT STOP NEFIDIPINE ADED OLMETEC PLUS AND NATRILAX,			
ICD Princ. Code: I10 Essential (primary) hypertension			
ICD 2nd Code: I20 Angina pectoris			
ICD 3rd Code:			
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
CARDIOLOGY			
Requisition	06/10/2020	0684	E.C.G
Requisition	06/10/2020	0686	ECHO CARDIOGRAPHY
Transaction	06/10/2020	0684	E.C.G
Transaction	06/10/2020	0686	ECHO CARDIOGRAPHY
LABORATORY			
Requisition	06/10/2020	0129	RBS
Requisition	06/10/2020	0017	CREATININE
Requisition	06/10/2020	0034	CHOLESTEROL
Requisition	06/10/2020	0037	LDL
Transaction	06/10/2020	0129	RBS
Transaction	06/10/2020	0017	CREATININE
Transaction	06/10/2020	0034	CHOLESTEROL
Transaction	06/10/2020	0037	LDL
PHARMACY			
Requisition	06/10/2020	GEN02863	OLMESARTAN MEDOXOMIL+ HYDROCHLOROTHIAZIDE 40/12.5MG TAB OLMETEC PLUS Oral Every 24 hours For 30 Days
Requisition	06/10/2020	GEN02493	INDAPAMIDE 1.5MG TAB ONE OD Oral Every 24 hours For 30 Days
Requisition	06/10/2020	GEN01735	BISOPROLOL FUMARATE, HYDROCHLOROTHIAZIDE 5/12.5MG TAB ONE OD Oral Every 24 hours For 30 Days
Requisition	06/10/2020	GEN01515	ACETYL SALICYLIC ACID PROTECT 100MG TAB ONE OD Oral Every 24 hours For 28 Days
Transaction	06/10/2020	00000564	CONCOR-PLUS 5MG 20TAB
Transaction	06/10/2020	00010124	NORMATEC PLUS 40/12.5MG 28TAB
Transaction	06/10/2020	00001901	NATRILIX-SR 1.5MG 30TAB
Transaction	06/10/2020	00010306	AZERA 100MG 90TAB