

Date: 11/10/2020    Pay Method:R    MRN: 292186    Age/Sex : 26/F    Doctor: DR. HEND AHMAD									
<b>Vital Signs:</b> Temperature: 37    BP: 120/80    Pulse: 80    FOLLOW-UP :Trn. 08:31PM Check-In: 8:35PM Check-Out:									
<b>Chief Complaint:</b> THE PATIENT COME TO SEE RESULT OF INVESTIGATIONS,									
<b>Significant Signs:</b> VIT D DEFICIENCY,									
<b>Duration of Illness:</b>					<b>LMP:</b>				
<b>Other Conditions:</b>									
<b>Diagnosis:</b>									
<b>Management:</b>									
<b>ICD Princ. Code:</b>									
<b>ICD 2nd Code:</b>									
<b>ICD 3rd Code:</b>									
<b>ICD 4th Code:</b>									
<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									
<b>Trn. Type</b>	<b>Date</b>	<b>Code</b>	<b>Service Description + Dosage</b>						
<b>LABORATORY</b>									
Requisition	04/10/2020	0058	PROLACTIN	Quantity 1					
Requisition	04/10/2020	0055	TSH	1					
Requisition	04/10/2020	2163	VITAMIN D (25-HYDROXYCHOLECALCIFEROL)	1					
Transaction	04/10/2020	0058	PROLACTIN	1					
Transaction	04/10/2020	0055	TSH	1					
Transaction	04/10/2020	2163	VITAMIN D (25-HYDROXYCHOLECALCIFEROL)	1					
<b>PHARMACY</b>									
Requisition	04/10/2020	GEN02069	DIETARY FIBRE SUPPLEMENT (GUAR GUM ) POWDER INOVARI PLUS SACCHUT Oral Every twelve hours For 30 Days	Quantity 1					
Requisition	11/10/2020	GEN01784	CALCIUM CARBONATE + COLECALCIFEROL TAB 1TAB 50000 Oral Once every week For 60 Days	1					
<b>RADIOLOGY</b>									
Requisition	04/10/2020	4128	TRANSVAGINAL ULTRASOUND	Quantity 1					
Transaction	04/10/2020	4128	TRANSVAGINAL ULTRASOUND	1					