

Date: 29/11/2020	Pay Method: R	MRN: 520218	Age/Sex : 48/M	Doctor: DR. HAYSAM ADEL MOHAMED
<b>Vital Signs:</b> Temperature: 37 BP: 130/80 Pulse: 80 CHECK-UP : Trn. 10:11AM Check-In: 10:22AM Check-Out: 11:14AM				
<b>Chief Complaint:</b> for follow up of his condition sever burning and numbness of foots cough +expection + dyspnea + tachypnea sever constipation,				
<b>Significant Signs:</b> chest , heart : clinically free,				
<b>Duration of Illness:</b> chronic, LMP:				
<b>Other Conditions:</b> known to be HTN , DM , chronic peripheral neuritis , mixed hyperlipidemia on regular treatment , not known to be cardiac before,				
<b>Diagnosis:</b> sever peripheral neuritis acute bronchitis,				
<b>Management:</b>				
<b>ICD Princ. Code:</b> I10 Essential (primary) hypertension				
<b>ICD 2nd Code:</b> E11 Type 2 diabetes mellitus <input type="checkbox"/> Chronic <input type="checkbox"/> Congenital <input type="checkbox"/> RTA				
<b>ICD 3rd Code:</b> E78.2 Mixed hyperlipidaemia <input type="checkbox"/> Work Related <input type="checkbox"/> Vaccination <input type="checkbox"/> Check-Up				
<b>ICD 4th Code:</b> K59.0 Constipation <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>PHARMACY</b>				
Requisition	29/11/2020	GEN03162	SITAGLIPTIN+ METFORMIN 50/850MG TAB 1 tab Oral Every twelve hours For 30 Days	1
Requisition	29/11/2020	GEN02864	OLMESARTAN MEDOXOMIL+ HYDROCHLOROTHIAZIDE 40/25MG TAB 1 tab Oral Every 24 hours For 30 Days	1
Requisition	29/11/2020	GEN02232	FENOFIBRATE 145MG TAB 1 tab Oral Every 24 hours For 30 Days	1
Requisition	29/11/2020	GEN03387	VITAMIN B12 (MECOBALAMIN) 1 tab Oral Every 24 hours For 30 Days	1
Requisition	29/11/2020	GEN01653	ATORVASTATIN 20MG TAB 1 tab Oral Every 24 hours For 30 Days	1
Requisition	29/11/2020	GEN02228	FEBUXOSTAT 80MG TAB 1 tab Oral Every 24 hours For 30 Days	1
Requisition	29/11/2020	GEN01510	ACETYL SALICYLIC ACID 100MG TAB 1 tab Oral Every 24 hours For 30 Days	1
Requisition	29/11/2020	GEN03141	SENNOSIDE-B + ISPAGULA HUSK + PLANTAGINIS SEMEN OVATAE GRANULES 1 spoon Oral Every eight hours For Ten Days	1
Transaction	29/11/2020	00007462	GLIPTAMET 50/850MG 56TAB	1
Transaction	29/11/2020	00010125	NORMATEC PLUS 40/25MG 28TAB	1
Transaction	29/11/2020	00000930	LIPANTHYL 145MG 30Tab	1
Transaction	29/11/2020	00002664	METHYCOBAL 500MCG 30TAB	1
Transaction	29/11/2020	00005098	TOVAST 20MG 30TAB	1
Transaction	29/11/2020	00008357	AGOUT-FC 80MG 30TAB	1
Transaction	29/11/2020	00009824	ASPIRIN Protect 100mg 60TAB	1
Transaction	29/11/2020	00000054	AGIOLAX 250GM GRANNULES	1
<b>RADIOLOGY</b>				
Requisition	29/11/2020	0244	CHEST PA VIEW	1
Transaction	29/11/2020	0244	CHEST PA VIEW	1