



UTTARA EPZ MEDICAL CENTER

Shongaishi, Nilphamari

PRESCRIPTION

1014404

Ticket /Reg. No. : 2024/10101028
Patient ID : 1014404
Employee ID : 2085
Mobile : 01304424967
Doctor : Dr. Samima Akter, MBBS

Date : 02-Mar-2024
Name : KHAIRUL ISLAM
Company : Ventura Leatherware MFY (BD) Ltd.
Address : UEPZ

Age : 30
Gender : Male

Prescription (Only for Doctor's Use)

C/C:-
pt come with inv report

O/E:-
Chest X-RAY:-NAD

Rx:-
1 Tab. Azithromycin 500 mg - (5) 0+0+1 - 7 days

General Advice:-
>> AVOID COLD WATER

Bed rest for 2 days

Handwritten signature and date: 02.3.24

N.B.:- Please bring the prescription on next visit.

Dr. Samima Akter



UTTARA EPZ MEDICAL CENTER

Shongaishi, Nilphamari

PRESCRIPTION

1014404

Ticket /Reg. No. : 2024/10101025
Patient ID : 1014404
Employee ID : 2085
Mobile : 01304424967
Doctor : Dr. Samima Akter, MBBS

Date : 02-Mar-2024
Name : KHAIRUL ISLAM
Company : Ventura Leatherware MFY (BD) Ltd.
Address : UEPZ

Age : 30
Gender : Male

Prescription (Only for Doctor's Use)

C/C:-
Cough for 22 days
Feverish

O/E:-

Adv:-
CBC (TC,DC,ESR,HB%,P Count,RBC Count)
X-Ray - Chest P/A View

Rx:-
1 Tab.Paracetamol 665mg - (6) 1+0+1(AFTER MEAL).....3 DAYS
2 Tab. Famotidine 20mg - (10) 1+0+1 Before meal 5 days
3 Syp. Ambroxol HCL - (1) 2TSF TDS 14days
4 Tab. Desloratidine 5 mg - (5) 0+0+1 5 days

General Advice:-
>> AVOID COLD WATER
>> Tab Monas 10 mg - 0+0+1 - 10 days

Ref. To:-

Handwritten signature and date: 02.3.24

N.B.:- Please bring the prescription on next visit.

Dr. Samima Akter

For Ramana